

PERSONNEL ORDER NO. 2014-106  
"B" SERIES EMPLOYMENT

25 July 2014

Resignations for the following Department members have been processed as follows:

<u>Empl. #</u>	<u>Name</u>	<u>Title</u>	<u>Unit</u>	<u>Effective Date</u>
	Ammons, Marilyn J.	Police Officer	145	15 Jul 2014*
	Boudreau, Kenneth J.	Sergeant	393	18 Jul 2014*
	Brown, Samuel E.	Detective	610	15 Jul 2014*
	Castro, Frank S.	Police Officer	701	15 Jul 2014*
	Dedore, Jack M.	Sergeant	311	15 Jul 2014*
	Donegan, Thomas F.	Sergeant	022	15 Jul 2014*
	Dowling, Richard P.	Sergeant	007	15 Jul 2014*
	Elizondo, Kathryn L.	Police Officer	019	15 Jul 2014*
	Gavin, James M.	Sergeant	014	16 Jul 2014*
	Hardy, Denese	Police Officer	025	15 Jul 2014*
	Ivery, Leonardo	Police Officer	024	15 Jul 2014*
	Kelley, John J.	Police Officer	010	15 Jul 2014*
	Kenny, John A.	Captain	130	15 Jul 2014*
	Lozada, Denise	Police Officer	393	15 Jul 2014*
	Luszowiak, Gregory M.	PO as Evidence Technician	277	17 Jul 2014*
	McKenna, John J.	Police Officer	012	15 Jul 2014*
	Midlowski, Robert J.	Detective	079	15 Jul 2014*
	Morado, Juan	Captain	006	15 Jul 2014*
	Rogers, Michael G.	Sergeant	019	15 Jul 2014*
	Still, Frank A.	Police Officer	019	15 Jul 2014*
	Sugrue, Denis J.	Police Officer	014	15 Jul 2014*
	Wood, Julia L.	Police Officer	002	15 Jul 2014*
	Woods III, John T.	Police Officer	001	15 Jul 2014*

\* = close of business

Garry F. McCarthy  
Superintendent of Police

Authenticated:



PERSONNEL ORDER NO. 2014-106  
"B" SERIES EMPLOYMENT



Home » Personnel System » Personnel Action Requests

[Print](#) | [Logout](#) | [Help](#)  
Personnel Action Requests

### Employee's PAR Details

Last Name BOUDREAU

Star No. 852

First Name KENNETH

Employee No. [REDACTED]

Middle Initial J

Unit Assigned No. 393

Employee Position SERGEANT OF POLICE

[REDACTED]

Business Close Day 18-JUL-2014

Retirement Effective Date 19-JUL-2014

Status APPROVED Requested Date and Time 06-JUN-2014  
09:35:15

### Remarks

I acknowledge that Personnel Exit Interview Report (PER-78) and signed ethics statement must be completed prior to retirement/resignation. Y

As a member aged 54 and younger, I acknowledge I am not 55 by COB and therefore not eligible for the retirement health care benefit.

Payout Option Lump sum

User: [REDACTED]  
Module: 15635 Revision: 1785

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HUMAN RESOURCE DIVISION

-8 JUL 14

**CITY OF CHICAGO**  
**Department of Human Resources**  
**End of Employment Form**  
COMPLETE ONLY IF EMPLOYEE IS LEAVING CITY SERVICE

[Print Form](#)

Name (Print) Kenneth J. Boudreau  
Employee Number ██████████ End of Employment Date 18JUL2014  
Sergeant ██████████ Code Number 9171  
Title ██████████ Payroll Number 1180  
Police Department ██████████ Zip Code 60631  
Home Address ██████████ Start Date 14JUL1986 Last Day Worked 18JUL14  
with City ██████████ Payroll On

Salary at time of separation (Year) \$ 109,278.00

Vacation Pay after Last Day Worked, if any.

\$ ██████████ From ██████████ Thru ██████████

Tuition reimbursement? No Yes, If yes, contact DHR - Finance Administration division.

Cdr Ryan  
Name of Immediate Supervisor ██████████ Telephone Number 312-7456-7910

DATE 08JUL2014

\*Reason for Leaving (Check most appropriate reason)

- 01 Other employment  
 02 AWOL  
 03 Family responsibilities  
 04 Return to school  
 05 Military service  
 06 Retirement  
 07 Marriage  
 08 Maternity  
 09 Relocation  
 10 Supervision  
 11 Working Conditions  
 12 Promotional opportunity  
 13 Compensation  
 14 Hours  
 15 Leave of Absence-Personal  
 16 No reason given  
 17 Resignation  
 18 Termination For Cause  
Other ██████████

\*Items received from employee (please initial)

Keys  Pager  Lap-Top, PDA  Cell Phone  BlackBerry  
 City I.D Card  External Memory (flash drive)  Security Card

Current address and phone?

Yes  No

If no, complete **Change of Address Form** and send it to DHR - RMS division.

\*Additional comments required \_\_\_\_\_

Preparer's Signature ██████████ Title: Commander ██████████ Phone Number 312-746-7910

Employee Signature ██████████ Date 08JUL2014

\*Departments MUST submit supporting documentation to DHR

**Zamora, Rebecca A.**

**From:** Pakula, Richard E.  
**Sent:** Friday, July 11, 2014 10:50 AM  
**To:** Zamora, Rebecca A.; Curry, Cynthia; Muzupappa, Phyllis A.  
**Cc:** Garcia, Virginia; Bates, Wanda  
**Subject:** RE: July 16 - 24

All are clear confidential side not relieved of police powers by BIA

**From:** Zamora, Rebecca A.  
**Sent:** Friday, July 11, 2014 10:40 AM  
**To:** Curry, Cynthia; Muzupappa, Phyllis A.; Pakula, Richard E.  
**Cc:** Garcia, Virginia; Bates, Wanda  
**Subject:** July 16 - 24

Boudreau, Kenneth J.	EE :	[REDACTED]	Retirement	7/18/14
Braithwaite, Kelly A.	EE	[REDACTED]	Retirement	7/24/14
Gavin, James M.	EE	[REDACTED]	Retirement	7/16/14
Luszowiak, Gregory M.	EE	[REDACTED]	Retirement	7/17/14

Rebecca Zamora  
Administrative Services Officer I  
Chicago Police Department  
3510 South Michigan Avenue  
Chicago, IL 60653  
Bell 5-5310, Pax 0349, Intercom 8-4020

**Zamora, Rebecca A.**

**From:** Muzupappa, Phyllis A.  
**Sent:** Thursday, July 24, 2014 11:05 AM  
**To:** Zamora, Rebecca A.  
**Subject:** RE: July 16 - 24  
clear

**Sgt. Phyllis Muzupappa**  
C/O Records Section  
Bureau of Internal Affairs, Chicago Police Department  
Bell (312)745-6324 Pax 0603 HQ 85008  
FAX (312)745-6992

**From:** Zamora, Rebecca A.  
**Sent:** Thursday, July 24, 2014 09:27  
**To:** Muzupappa, Phyllis A.  
**Subject:** FW: July 16 - 24

Good Morning Sgt. Muzupappa,

Can you please process all 3? Thank you

**From:** Pakula, Richard E.  
**Sent:** Friday, July 11, 2014 10:50 AM  
**To:** Zamora, Rebecca A.; Curry, Cynthia; Muzupappa, Phyllis A.  
**Cc:** Garcia, Virginia; Bates, Wanda  
**Subject:** RE: July 16 - 24

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**Sent:** Friday, July 11, 2014 10:40 AM  
**To:** Curry, Cynthia; Muzupappa, Phyllis A.; Pakula, Richard E.  
**Cc:** Garcia, Virginia; Bates, Wanda  
**Subject:** July 16 - 24

Boudreau, Kenneth J.	EE	[REDACTED]	Retirement	7/18/14
Braithwaite, Kelly A.	EE	[REDACTED]	Retirement	7/24/14
Gavin, James M.	EE	[REDACTED]	Retirement	7/16/14

Rebecca Zamora  
Administrative Services Officer I  
Chicago Police Department  
3510 South Michigan Avenue  
Chicago, IL 60653  
Bell 5-5310, Pax 0349, Intercom 8-4020

**Zamora, Rebecca A.**

**From:** Scott, Niya Q.  
**Sent:** Thursday, July 24, 2014 1:35 PM  
**To:** Zamora, Rebecca A.  
**Subject:** RE: Retirement  
Clear him

**From:** Zamora, Rebecca A.  
**Sent:** Wednesday, July 23, 2014 4:14 PM  
**To:** Scott, Niya Q.  
**Subject:** FW: Retirement

Niya,

Did you hear anything from IPRA? Clear, not clear??  
Thank you.

Rebecca Zamora  
Administrative Services Officer I  
Chicago Police Department  
3510 South Michigan Avenue  
Chicago, IL 60653  
Bell 5-5310, Pax 0349, Intercom 8-4020

**From:** Scott, Niya Q.  
**Sent:** Wednesday, July 16, 2014 1:33 PM  
**To:** Zamora, Rebecca A.  
**Subject:** RE: Retirement

Still waiting on IPRA responds

**From:** Zamora, Rebecca A.  
**Sent:** Wednesday, July 16, 2014 11:07 AM  
**To:** Scott, Niya Q.  
**Subject:** Retirement

Boudreau, Kenneth J.      EE [REDACTED] Retirement      7/18/14

Rebecca Zamora  
Administrative Services Officer I  
Chicago Police Department  
3510 South Michigan Avenue  
Chicago, IL 60653  
Bell 5-5310, Pax 0349, Intercom 8-4020

Employee Name: Boudreau, Kenneth J. Employee # [REDACTED]

## RESIGNATION/RETIREMENT

### PAR FORM ROUTER/CHECK-OFF LIST (FOR ELECTRONIC FORMS)

This PAR form router/check-off list is being generated as a guide to be utilized by staff members involved with processing PAR forms. This router is to be attached with every incoming PAR form and each phase of the process is to be completed by the staff member assigned to the tasks listed below:

ACTION	Date Completed	Checked Off By:	Action Not Applicable
Date Printed from report screen	8-Jul-14	[REDACTED]	
Electronic PAR reviewed	11 July 14	[REDACTED]	
LAD/Finance Notification (e-mail)	24 July 14	[REDACTED]	
Copy placed in Finance folder (after approved by Director of HR)	11 July 14	[REDACTED]	
Resignation/Retirement Processed (mainframe)	25 July 14	[REDACTED]	
Exit Interview pulled for DHR	V	[REDACTED]	
Copy to Cheryl (Oracle processing)			
Copy to Civilian Pension			
Copy to Sworn Pension			
Copy in Bin (cubicle D1) for Personnel Order (Yvette)	11 July 14	[REDACTED]	
Copy to Administration (Marilyn)			
Original electronic PAR to records for filing			
OTHER MISC...Please indicate action:			
<u>Transaction Receipt</u>			18 July 14

All Shakman-exempt personnel (other than those in City Council) must sign an Ethics Pledge obligating them to comply with these two-year restrictions.

Note that none of these restrictions prohibit you from accepting employment with anyone; however, they may restrict what you can do in your new employment.

Every City contract must include a provision that requires compliance with Chicago's Governmental Ethics Ordinance. Therefore, if your new employer has an interest in matters involving the City, it is imperative that you and your employer understand what, if any, post-employment restrictions apply to you.

This summary is only an overview intended to help current and former City employees develop a basic understanding of their responsibilities under the Ordinance. For authoritative guidance on specific questions, consultation with the Board of Ethics is recommended. The Board will maintain the confidentiality requirements of the Ordinance. For assistance, call (312) 744-9660.

#### **ACKNOWLEDGMENT BY EMPLOYEE**

I hereby acknowledge:

1. that I received a copy of the foregoing "NOTICE TO CITY EMPLOYEES OF CITY ETHICS RULES CONCERNING THE REVOLVING DOOR/POST-CITY EMPLOYMENT"; and
2. that I understand that I can view and download the complete text of the City's Governmental Ethics Ordinance by accessing the website of the Board of Ethics at [www.cityofchicago.org/Ethics/](http://www.cityofchicago.org/Ethics/)

Signature: 

Name: K. Boardman

Date: 7/8/14

## ACTION INVOLVED

- NEW HIRE  
 TRANSFER, IN & OUT  
 REHIRE  
 PROBATION, POLICE OFF.  
 SPECIAL POLICE  
 PRESS HARD

## EMPLOYMENT RECORDS ROUTING SLIP 23 FEB. 86

PREPARE IN QUANTITY  
COPY TO FINANCE DIVISION  
PINK COPY TO FINANCE DIVISION - PAYRC.  
GREEN COPY TO F.B.I. - IDENTIFICATION  
WHITE COPY TO CPD IDENTIFICATION SECTION

DATE APPOINTED

NAME (LAST - FIRST - M.I.)

BOUDREAU, KENNETH J.

MAIDEN NAME

EMPLOYEE NO.

## REINSTATEMENT

- CAREER SERVICE  
 MILITARY LEAVE  
 LEAVE OF ABSENCE  
 DISABILITY PENSION

## TITLE CHANGE

- PROMOTION  
 DEMOTION  
 CERTIFICATION  
 TITLE CHANGE ONLY

 PRINTS ON FILE

COMMENTS

ACTION INITIATED BY \_\_\_\_\_ DATE \_\_\_\_\_ EMPLOYMENT SECTION APPROVAL

## IDENTIFICATION CLEARANCE

FINGERPRINTED LOCAL & F.B.I. AT IDENT. SECTION	INITIAL @ DATE	FINNACE DIVISION
RECORD INDICATED BY APPLICANT	NO RECORD	PAYROLL NO.
IDENT. SECT.	IDENT. SECT.	RATE
F. B. I.		APPOINTMENT DATE
SIGNATURE OF FINGERPRINTED SECTION		

NAME CHECK - RECORDS INQUIRY SECTION	CONT. SERVICE DATE	SENIRITY DATE
RECORD INDICATED BY APPLICANT	A RING	PENSION
NO RECORD	DOCK	SWORN INSURA
RECORD ATTACHED		FORCED GROSS
DATE	PROMOTION DATE	EMPLOYEE NO.

STAR NO.

DATE APPOINTED

NAME (LAST - FIRST - M.I.)

BOUDREAU, KENNETH J.

MAIDEN NAME

EMPLOYEE NO.

ADDRESS

ZIP CODE

RES.DIST.

UNIT

MARITAL STATUS

SOCIAL SECURITY NO.

PLACE OF BIRTH

SEX

RACE

C.S. STATUS

GRADE

ST.

TITLE CODE

POSITION TITLE

1960

CHGO, Illinois

M

X

O

I

5

1961

PROB. POLICE OFF.

BUDGET ACTIVITY SECTION

PAGE

LINE

BUDGET RATE

FED. TAX EXEMPT. STATE  
MARRIED SINGLE

CH.

DID YOU EVER WORK IN THE CITY SERVICE? IF YES, WHAT POSITION DID YOU HOLD?

CH.

COMMENTS

REINSTATEMENT	INITIAL @ DATE	FINNACE DIVISION
RECORD INDICATED BY APPLICANT	NO RECORD	PAYROLL NO.
IDENT. SECT.	IDENT. SECT.	RATE
F. B. I.		APPOINTMENT DATE
SIGNATURE OF FINGERPRINTED SECTION		
RECORD INDICATED BY APPLICANT	A RING	PENSION
NO RECORD	DOCK	SWORN INSURA
RECORD ATTACHED		FORCED GROSS
DATE	PROMOTION DATE	EMPLOYEE NO.
CODED BY ENTERED BY VER.		

ACTION INVOLVED	EMPLOYMENT	DS ROUTING SLIP	STAR NO.
<input type="checkbox"/> NEW HIRE <input type="checkbox"/> TRANSFER INTO DEPT. <input type="checkbox"/> REHIRE <input type="checkbox"/> PROBATION - POLICE OFF. <input type="checkbox"/> AUXILIARY POLICE <input type="checkbox"/>	PREPARE IN QUAD	TC: 2: BLUE COPY TO FINANCE DIVISION PINK COPY TO FINANCE DIVISION - P. JILL GREEN COPY TO F.B.I. - IDENTIFICATION WHITE COPY TO CPD IDENTIFICATION SECTION	17998
REINSTATEMENT	PRESS HARD	NAME (LAST - FIRST - M.I.)	MAIDEN NAME
<input type="checkbox"/> CAREER SERVICE <input checked="" type="checkbox"/> MILITARY LEAVE <input type="checkbox"/> LEAVE OF ABSENCE <input type="checkbox"/> DISABILITY PENSION <input type="checkbox"/> POLICE BOARD <input type="checkbox"/>	[REDACTED]	<b>BOUDREAU, KENNETH J.</b>	ZIP CODE
TITLE CHANGE		MARITAL STATUS	RES.DIST.
<input type="checkbox"/> PROMOTION <input type="checkbox"/> DEMOTION <input type="checkbox"/> CERTIFICATION <input type="checkbox"/> TITLE CHANGE ONLY	POSITION CODE	M	UNIT
PRINTS ON FILE	9165	PLACE OF BIRTH	632
COMMENTS	9165 PO ASSIGNED AS DETECTIVE	SEX	RACE
	(4183) 4065	M	O I N S
	DID YOU EVER WORK IN THE CITY SERVICE? IF YES, WHAT POSITION DID YOU HOLD? <input type="checkbox"/> YES <input type="checkbox"/> NO	BUDGET RATE	GRADE
		37,614	D-2
		FED. TAX EXEMPT, MARRIED SINGLE	STEP
		1	1
		CHARITY AMT.	0

162	31 MAY 91	DATE
IDENTIFICATION CLEARANCE		31 May 91
<p>UFO ENTERED</p> <p>RECORD INDICATED BY APPLICANT</p> <p>APPLICANT #300</p> <p>SIGNATURE OF PERSON EXAMINING FILE</p> <p>BY [REDACTED]</p> <p>KARDEX</p> <p>DATE _____</p> <p>BY _____</p> <p>SIGNATURE OF PERSON EXAMINING FILE</p>	<p>CIVIL SERVICE</p> <p>CS 145 91-2484</p> <p>DATE 6/3/91</p>	<p>FINNCE DIVISION</p> <p>PAYROLL NO. 1180</p> <p>APPPOINTMENT DATE 7-14-86</p> <p>CONT. SERVICE DATE 7-14-86</p> <p>PENSION</p> <p>DOCK</p> <p>PROMOTION DATE 8-16-90</p> <p>CODED BY</p> <p>ENTERED BY</p> <p>VERIFIED BY</p>
		RATE 3134.50
		ANNIVERSARY DATE 1-16-91
		SENIORITY DATE 7-14-86
		SWORN INSURANCE
		FORCED GROSS
		EMPLOYEE NO.

CPD-62.125 (Rev. 2/87)

APPENDIX

TYPE OR PRINT ALL INFORMATION IN  
ONE NAME

Innovation Control Number

APPLICANT		Last Name, NAM		First Name		Middle Name	
Submitting Agency Name		State Bureau Number - BCI					
PRO. POLICE OFFICER		Sex		SOB		Date of Birth	
Submitting Agency NCIC No.		Race		Age		DoB	
Reply To:		HAI		Skin		Height	
CHICAGO POLICE DEPARTMENT		SRO		SKN		Weight	
1121 S. STATE ST.		Classification		SCARS MARKS STAMPS SMT		Eyes	
CHICAGO, ILLINOIS 60605		16		[REDACTED]		[REDACTED]	
Signature of Agent or Fingerprint		Identification No.		Miscellaneous No. - MINU.		Reference -	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
SEE REVERSE SIDE FOR SIGNATURE OF PERSON BEING PRINTED.		Date Printed	Mon.	Day	Yr.	NCIC - Fingerprint Classification - FPC	
		8/3	33	31	6		

PERSONNEL DIVISION  
PERSONNEL INVESTIGATIONS

Date 13 June 1986

NAME BOUDREAU, Kenneth J.

SSN [REDACTED]

CASE# 86-P-1058



**ILLINOIS STATE POLICE**  
BUREAU OF IDENTIFICATION  
260 NORTH CHICAGO STREET  
JOLIET, ILLINOIS 60432-4075

CHICAGO POLICE DEPARTMENT  
3510 SOUTH MICHIGAN  
CHICAGO, IL 60653

PURSUANT TO A FINGERPRINT BASED SEARCH USING THE FINGERPRINT CARD SUBMITTED BY YOUR AGENCY, THE FILES OF THIS BUREAU FAILED TO REVEAL ANY CRIMINAL RECORD FOR THIS SUBJECT. THIS FINGERPRINT CARD IS BEING RETAINED BY THE BUREAU OF IDENTIFICATION.

IF YOU HAVE ANY QUESTIONS CONCERNING THIS MATTER, PLEASE FEEL FREE TO CONTACT THE BUREAU OF IDENTIFICATION AT (815) 740-5160.

**IDENTIFIERS**

DCN [REDACTED]

TCN: [REDACTED]

SUBMISSION TYPE: APP

RESULT: NEW SID CREATED SID: [REDACTED]

Name: BOUDREAU, KENNETH J

Sex Code: M

Race Code: W

DOB: [REDACTED] 1960

**STATE USE ONLY**

**WARNING:** Release of this information to unauthorized individuals or agencies or misuse is prohibited by Federal Law  
Title 42 USC 3787g pertaining to criminal history information.



**City of Chicago  
Employee Change of Address Form**

Department CHGO Police Department Bureau of INVESTIGATIVE SERVICES

Name KENNETH J. BONDREAU

Position title 9165 - POLICE DETECTIVE

Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address [REDACTED] Zip Code 60655

New Address [REDACTED] Zip Code 60655

Effective Date 06/97

New Phone Number [REDACTED]

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

CHICAGO POLICE DEPT.  
13 MAR 1998  
6  
25

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

Signed [REDACTED]

Date 21 MAR 98

Complete and sign two copies.  
First copy to departmental file.  
Second copy to Department of Personnel.



**City of Chicago  
Employee Change of Address Form**

Department Police

Bureau INVESTIGATIVE Services

Name KENNETH J. BOUDREAU

Position title DETECTIVE 9165

Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address [REDACTED] Zip Code 60616

New Address [REDACTED] Zip Code 60655

Effective Date 20 MAR 95

New Phone Number [REDACTED]

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

8  
=  
1  
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UFO  
ENTERED  
#801

Signed [REDACTED]

Date 15 MAR 95

Complete and sign two copies.  
First copy to departmental file.  
Second copy to Department of Personnel.



**City of Chicago  
Employee Change of Address Form**

Department CHGO POLICE Bureau A/3 Violent Crimes  
Name KENNETH J. BOUDREAU  
Position title DETECTIVE 9165  
Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address [REDACTED] Zip Code 60638  
New Address [REDACTED] Zip Code 60616  
Effective Date 18 MAR 92  
New Phone Number [REDACTED]

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

UFO  
ENTERED  
#801

Signed [REDACTED]

Date 18 MAR 92

24  
Complete and sign two copies.  
First copy to departmental file.  
Second copy to Department of Personnel.



**City of Chicago  
Employee Change of Address Form**

Department POLICE Bureau \_\_\_\_\_  
Name KENNETH J. BOUDREAU  
Position title P.O. 9161  
Social Security number XXXXXXXXXX

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address XXXXXXXXXX Zip Code 60638  
New Address XXXXXXXXXX Zip Code 60638  
Effective Date 07 April 87  
New Phone Number XXXXXXXXXX

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.



Date

19 June 89

Complete and sign two copies.  
First copy to departmental file.  
Second copy to Department of Personnel.



City of Chicago  
Employee Residency Affidavit

Department CHICAGO POLICE

Bureau UNIT 044

Name BOUDREAU, KENNETH J.

Position title PROBATIONARY POLICE OFFICER,

Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

My address is: [REDACTED]

CHICAGO, ILLINOIS

zip code 60638

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand both the front and reverse sides of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

Signed [REDACTED]

Date 14-July-86

Complete and sign two copies.

First copy to department file.

Second copy to Department of Personnel.



City of Chicago  
Employee Change of Address Form

Department

*POLICE*

Bureau

Name

KENNETH J. BOUDREAU

Position title

*DETECTIVE*

Social Security number

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address

Zip Code *60661*

New Address

Zip Code *60616*

Effective Date

*28 DEC 93*

New Phone Number

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

*2*

**UFO  
ENTERED  
#801**

Signed

Date

*05 JAN 93*

Complete and sign two copies.  
First copy to departmental file.  
Second copy to Department of Personnel.



**City of Chicago  
Employee Change of Address Form**

Department Police

Bureau UNIT 612

Name KENNETH J. BOUDREAU

Position title DETECTIVE

Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address [REDACTED]

Zip Code 60609

New Address [REDACTED]

Zip Code 60661

Effective Date 20 Sep 92

New Phone Number [REDACTED]

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

Signed [REDACTED]

Date 22 Oct 93

Complete and sign two copies.  
First copy to departmental file.  
Second copy to Department of Personnel.

The John Marshall Law School  
Institute of Criminal Justice

*Certificate of Attendance*

KENNETH J. BOUDREAU

*Law Enforcement Education*

CRISIS INTERVENTION AND CONFLICT MANAGEMENT INCLUDING  
**Crisis Intervention in Family Disputes**

Saturday, December 7, 1985



Leonard J. Schrager, Dean

Minor K. Wilson, Director

The John Marshall Law School  
Institute of Criminal Justice

*Certificate of Attendance*

KENNETH BOUDREAU

*Law Enforcement Education*

New Laws Relating to Juveniles  
Including Child Abuse & Neglect

Saturday, September 21, 1985



Leonard J. Schrager, Dean

Minor K. Wilson, Director

REPRINTED AT GOVEX INSTITUTE EVIDENCE



# *Departmental Commendation*

*City of Palos Hills Police Department*

AWARDED TO

KENNETH J. BOUDREAU

*For conduct above and beyond the call of duty. The city of  
Palos Hills, Illinois and the members of the Palos Hills Police  
Department commend you.*

Dated 20 MARCH 1984

DANIEL HURLEY, Chief 





*This Certifies That*

KENETH J. BOUDREAU

*Has Satisfactorily Completed The Course Of Instruction In*

BREATH-ALCOHOL TESTING OPERATOR'S

*Which Has Been Presented Through Cooperation Of The  
Illinois Department Of Law Enforcement Academy  
And The Police Training Institute, And Is Hereby Awarded This*

**CERTIFICATE**

*In Recognition Thereof  
In Witness Whereof, We Have Affixed Our Signatures  
At CHAMPAIGN, ILLINOIS This 27<sup>th</sup> Day Of APRIL 1984*

DIRECTOR  
POLICE TRAINING INSTITUTE  
UNIVERSITY OF ILLINOIS

DIRECTOR  
OFFICE OF TRAINING  
DEPARTMENT OF LAW ENFORCEMENT  
ACADEMY

The John Marshall Law School  
Institute of Criminal Justice

*Certificate of Attendance*

KEN BOUDREAU

*Law Enforcement Education*

Auto Theft and Related  
Offenses

December 8, 1979



Fred F. Herzog, Dean

Minor K. Wilson, Director



## Departmental Salute

*City of Palos Hills Police Department*

AWARDED TO

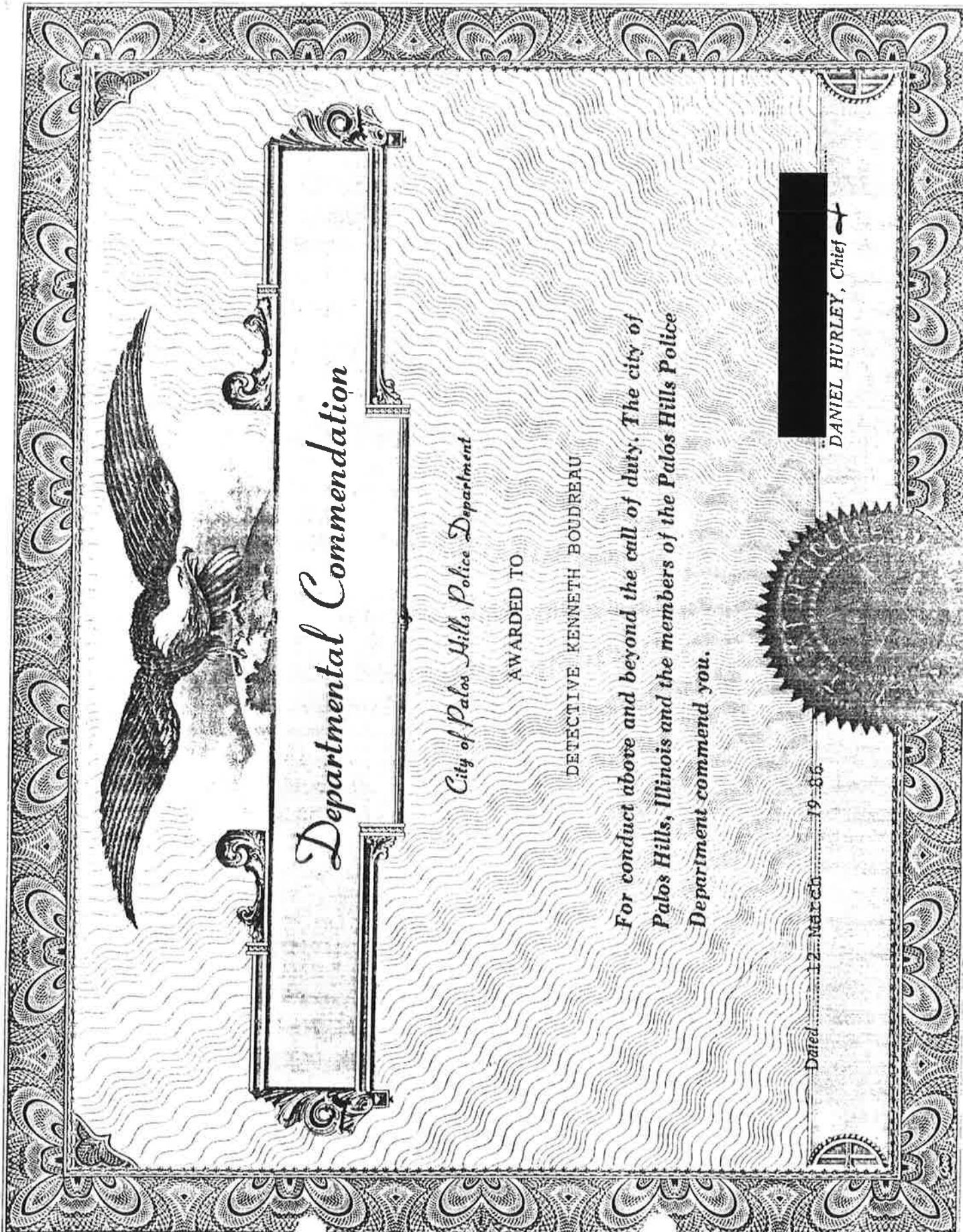
KENNETH J. BOUDREAU

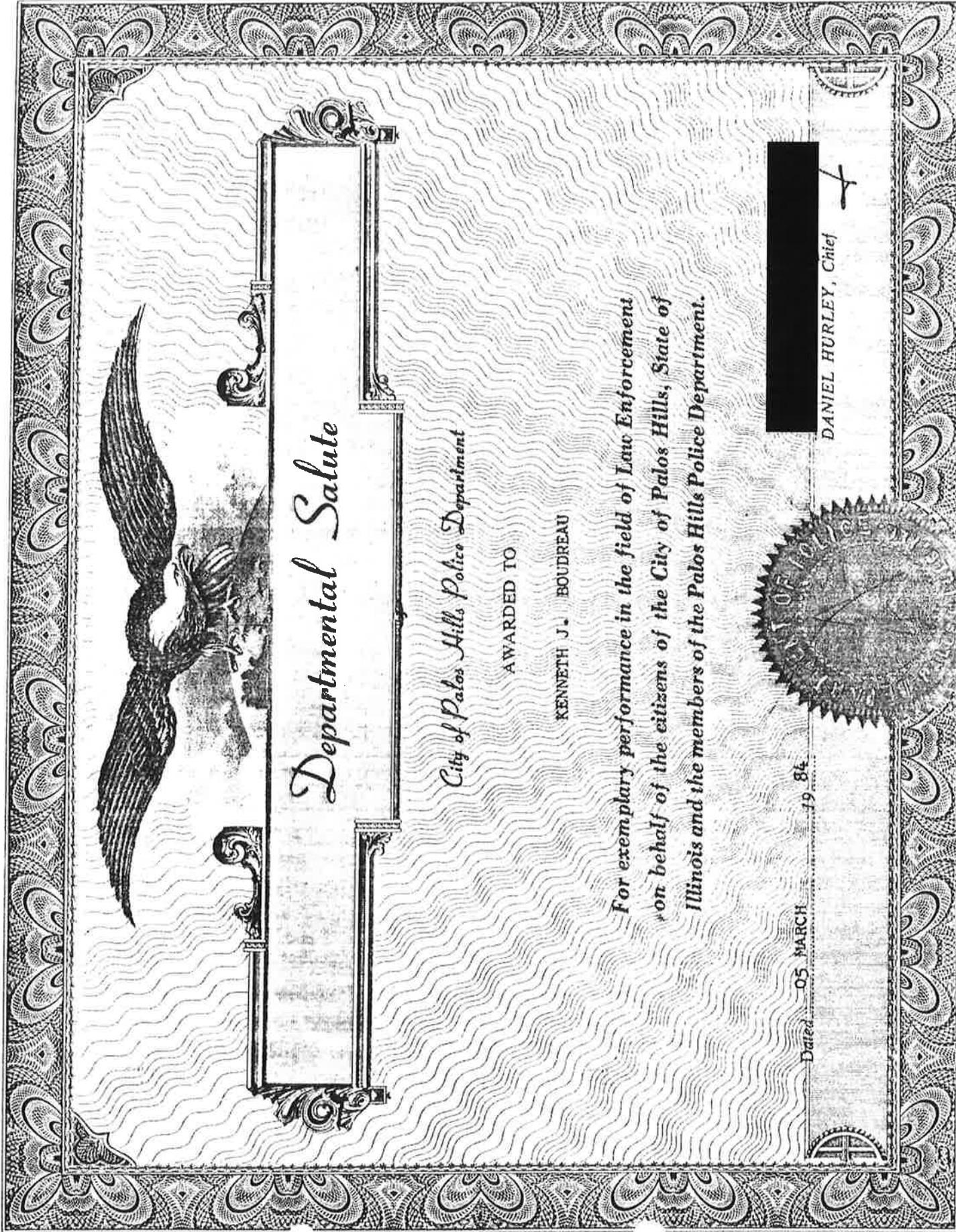
*For exemplary performance in the field of Law Enforcement  
on behalf of the citizens of the City of Palos Hills, State of  
Illinois and the members of the Palos Hills Police Department.*

Dated..... 29 DECEMBER 1983.

[Redacted]  
DANIEL HURLEY, Chief









# Departmental Salute

City of Palos Hills Police Department

## AWARDED TO

KENNETH BOUDREAU

*For exemplary performance in the field of Law Enforcement  
on behalf of the citizens of the City of Palos Hills, State of  
Illinois and the members of the Palos Hills Police Department,*

Dated: 2 MARCH 1982

DANIEL HURLEY, Chief





State Of Illinois

CERTIFICATE

KENNETH J. BOUDREAU

awarded to

by the ILLINOIS LOCAL GOVERNMENTAL LAW  
ENFORCEMENT OFFICERS TRAINING BOARD

In recognition of the successful completion of the 40 hours course in  
BREATH-ALCOHOL TESTING OPERATORS

at CHAMPAIGN, ILLINOIS from APRIL 23 to APRIL 27, 1984

SCHOOL DIRECTOR

CHAIRMAN OF BOARD

EXECUTIVE DIRECTOR

# State Of Illinois



# CERTIFICATE OF COMPLETION

awarded to KENNETH J. BOUDREAU

## by the ILLINOIS LOCAL GOVERNMENTAL LAW ENFORCEMENT OFFICERS TRAINING BOARD

In recognition of the successful completion of the \_\_\_\_\_ 400 hours course in  
(Including requirements P.A. 79-652 - Mandatory Firearms Training)  
COOK COUNTY SHERIFF'S POLICE ACADEMY  
at Maywood, Illinois \_\_\_\_\_ from 4 Apr. 1983 to 10 June 1983

EXECUTIVE DIRECTOR

CHAIRMAN OF BOARD

*[Signature]*  
SCHOOL DIRECTOR

REPRODUCED AT GOVERNMENT EXPENSE



## State Of Illinois

# CERTIFICATE

awarded to

KENNETH J. BOURDREAU

## by the ILLINOIS LOCAL GOVERNMENTAL LAW ENFORCEMENT OFFICERS TRAINING BOARD

In recognition of the successful completion of the \_\_\_\_\_ 28 hours course in

MANDATORY FIREARMS TRAINING (PA 79-652)

at COOK COUNTY SHERIFF'S ACADEMY from 1, MARCH, to 6, MARCH, 1982

SCHOOL DIRECTOR

CHAIRMAN OF BOARD

EXECUTIVE DIRECTOR

*[Redacted]*

REPRODUCED AT GOVERNMENT EXPENSE



# Departmental Salute

City of Palos Hills Police Department

AWARDED TO

Ofc. Kenneth Boudreau

*For exemplary performance in the field of Law Enforcement  
on behalf of the citizens of the City of Palos Hills, State of  
Illinois and the members of the Palos Hills Police Department.*

Dated.....5 January.....1985.....

[Redacted]  
DANIEL HURLEY, Chief



TO: COMMANDING OFFICER, PERSONNEL INVESTIGATIONS.  
FROM: Detective James L. Green #110, Personnel Investigations

DATE: 13 June 1986  
EXAM #: 50003  
CASE #: 86-P-1058

BACKGROUND INVESTIGATION OF: [NAME] BOUDREAU, Kenneth J.  
[SSN] [REDACTED] [SEX] Male [RACE] White [D.O.B.] [REDACTED] 1960  
[ADDRESS] [REDACTED] N, Chicago, Illinois [ZIP] 60638  
[H/M PHONE] [REDACTED] [2nd PHONE]  
[INTERVIEW DATE/ TIME/ LOCATION] 11 June 1986, 1700 hrs. at applicants apartment.

YES	MEETS BACKGROUND STANDARDS IF "YES" BOX IS CHECKED	NO	DOES NOT MEET BACKGROUND STANDARDS IF "NO" BOX CHECKED	(CODE)	ATTACHMENT REQ'D CHECK BOX
<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Y N SECTION I:					
<input checked="" type="checkbox"/>	A. PERSONAL HISTORY QUESTIONNAIRE COMPLETED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	B. BACKGROUND INVESTIGATION COMPLETED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	C. CONFORMS TO ALL STANDARDS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Y N SECTION V: PROOF OF RESIDENCY					
<input checked="" type="checkbox"/>	AGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	RESIDENCY / PROOF OF RESIDENCY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	EDUCATION / TRANSCRIPTS or GED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	MEDICAL / MEDICAL DOCUMENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Y N SECTION II: PAST CRIMINAL RECORD					
<input checked="" type="checkbox"/>	A. FELONIES - FORCIBLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	B. CRIMES - OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	C. HARD DRUGS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	D. MARIJUANA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	E. SEX OFFENSES AND BODILY HARM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	F. CRIMINAL DAMAGE AND TRESPASS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	G. GUNS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	H. AUTOMOBILE / DRIVING HISTORY/ LICENSING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	I. DISORDERLY CONDUCT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	J. CRIMINAL ACTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Y N SECTION III: PAST EMPLOYMENT & JUDGMENTS					
<input checked="" type="checkbox"/>	A. JUDGMENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	B. PREVIOUS EMPLOYMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Y N SECTION IV: MILITARY HISTORY					
<input checked="" type="checkbox"/>	A. TYPE OF DISCHARGE	DD214	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	B. MILITARY RECORDS / OFFENSES (IF APPLICABLE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Y N SECTION VI: PERSONAL HISTORY QUESTIONNAIRE					
<input checked="" type="checkbox"/>	FALSE STATEMENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Y N SECTION VII: WAIVER					
<input checked="" type="checkbox"/>	WAIVER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

DET: Detective James L. Green #11087, Personnel Investigations

REVIEWED BY:

r.s.form

COMMENT(S):

rev. 01-86

CHARACTER REFERENCE & NEIGHBORHOOD INTERVIEW  
CHICAGO POLICE DEPARTMENT

CONFIDENTIAL

DA / TIME OF INTERVIEW

POSITION APPLIED FOR

Prob. Police Officer

SOCIAL SECURITY NO.

POSITION OR TITLE

APPLICANT'S NAME

Kenneth J. Boudreau

APPLICANT'S ADDRESS

Chicago, Ill. 60638

INTERVIEWEE'S NAME

CHARACTER REFERENCE & NEIGHBORHO. INTERVIEW  
CHICAGO POLICE DEPARTMENT

CONFIDENTIAL

DATE TIME OF INTERVIEW

APPLICANT'S NAME

Kenneth J. Boudreau

POSITION APPLIED FOR

Prob. Police Officer

APPLICANT'S ADDRESS

Chicago, Ill. 60638

SOCIAL SECURITY NO.

CHARACTER REFERENCE & NEIGHBORHOOD INTERVIEW  
CHICAGO POLICE DEPARTMENT

CONFIDENTIAL

DATE / TIME OF INTERVIEW

APPLICANT'S NAME

Kenneth J. Boudreau

APPLICANT'S ADDRESS

Chicago, Ill. 60638

POSITION APPLIED FOR

Prob. Police Officer

SOCIAL SECURITY NO.

APPLICANT QUESTIONNAIRE  
CHICAGO POLICE DEPARTMENT

INSTRUCTIONS: Answer all questions accurately and completely. You will be disqualified for any false statements. PRINT all information in ink. List additional information in Remarks Section.

1. NAME (LAST FIRST M.I.)

Boudreau Kenneth J

3. HOME ADDRESS (STREET NO., NAME, CITY, ZIP CODE)

[REDACTED] Chicago 60638

5. SOCIAL SECURITY NO.

TODAY'S DATE

31 MAY 91

2. MAIDEN NAME

4. HOME TELEPHONE NO.

6. WORK TELEPHONE NO.

544-8280

DO NOT WRITE IN THIS SECTION

POSITION

DETETIVE

REQUEST NO.

WA1403

EMPLOY

[REDACTED]

APPOINTMENT DATE

28 MAY 91

SOURCE

MILITARY COA - ODS

UNIT OF ASSIGNMENT

632

REMARKS SECTION

[REDACTED]

## EMPLOYMENT BACKGROUND

15. LIST PRESENT &amp; PREVIOUS EMPLOYMENT IN CHRONOLOGICAL ORDER FOR THE PAST 5 YEARS. START WITH THE PRESENT.

A. EMPLOYER (MOST RECENT)	POSITION	FROM-MO./YR.	TO-MO./YR.
ADDRESS	IMMEDIATE SUPERVISOR	SALARY	REASON FOR LEAVING
B. EMPLOYER	POSITION	FROM-MO./YR.	TO-MO./YR.
ADDRESS	IMMEDIATE SUPERVISOR	SALARY	REASON FOR LEAVING
C. EMPLOYER	POSITION	FROM-MO./YR.	TO-MO./YR.
ADDRESS	IMMEDIATE SUPERVISOR	SALARY	REASON FOR LEAVING
D. EMPLOYER	POSITION	FROM-MO./YR.	TO-MO./YR.
ADDRESS	IMMEDIATE SUPERVISOR	SALARY	REASON FOR LEAVING

16. HAVE YOU EVER BEEN EMPLOYED IF YES, DEPARTMENT  
BY THE CITY OF CHICAGO? YES       NO17. HAVE YOU EVER BEEN DISQUALIFIED IF YES, WHAT POSITION  
FOR ANY CAREER SERVICE POSITION? YES       NO

FROM \_\_\_\_\_ TO \_\_\_\_\_

DATE DISQUALIFIED \_\_\_\_\_

REASON \_\_\_\_\_

18. LIST SPECIAL SKILLS, TRAINING, EXPERIENCE, SUCH AS TYPING, SHORTHAND, LANGUAGE SPOKEN, ETC. INDICATE LEVEL OF ABILITY  
OR SPEED.  
  
\_\_\_\_\_  
  
\_\_\_\_\_

19. LIST 3 RESPONSIBLE ADULTS WHO KNOW YOU WELL ENOUGH TO GIVE INFORMATION CONCERNING YOU.

NAME	ADDRESS (NO., STREET & CITY)	OCCUPATION

QUEST.  
NO. \_\_\_\_\_ADDITIONAL REMARKS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I HEREBY AGREE THAT MY EMPLOYMENT WITH THE CHICAGO POLICE DEPARTMENT IS CONDITIONAL UPON CLEARANCE WITH THE FEDERAL BUREAU OF INVESTIGATION AND OTHER SCREENING DEVICES OF THE CHICAGO POLICE DEPARTMENT. I AUTHORIZE VERIFICATION OF ALL STATEMENTS CONTAINED ON THIS APPLICATION FORM IF I AM CONSIDERED FOR EMPLOYMENT. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF INFORMATION CALLED FOR WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF FURTHER CONSIDERATION FOR EMPLOYMENT, OR DISMISSAL IF I AM EMPLOYED.

THIS APPLICATION WILL BECOME INACTIVE AFTER SIX MONTHS. TO RETAIN AN ACTIVE STATUS, A NEW APPLICATION MUST BE SUBMITTED.

DATE

31 MAY 91

SIGNATURE





DEPARTMENT OF THE ARMY  
U. S. ARMY RESERVE COMPONENTS PERSONNEL AND ADMINISTRATION CENTER  
9700 PAGE BOULEVARD  
ST. LOUIS, MO 63132-5200

REPLY TO  
ATTENTION OF:  
DARC PAS-EVO/dh Boudreau, Kenneth J.

25 FEB 1987

Chicago Police Department  
1121 South State Street  
Attn: Personnel Division/Recruit Processing Section  
Chicago, IL 60605

Dear Sir:

Please refer only to the paragraphs checkmarked below.

[ ] Department of the Army policy forbids release of home addresses unless an emergency or other critical situation exists. Regulations do, however, permit us to forward letters to the last known address of separated service members. Your letter has been forwarded.

[ ] Action cannot be taken on your request because we have been unable to identify a record of service for the person concerned.

[ ] The enclosed letter is being forwarded to you by our office because Army regulations forbid release of your home address to the sender. The sender has been informed of this referral. Please use your own judgement in replying.

[ ] The service member you have inquired about is on active duty. Your request has been forwarded to:

( ) Enlisted persons: U. S. Army Enlisted Records Center, Fort Harrison, Indiana, 46249.

( ) Officers: U. S. Army Military Personnel Center, Personnel Actions and Records Directorate, Hoffman Building 1, 200 Stovall Street, Alexandria, Virginia, 22331.

[ ] We are unable to comply with your request because your service records were destroyed in a major fire at this Center on 12 July 1973. If you will resubmit your request with copies of your separation papers and any orders pertaining to your awards to this Center, attention: DARC-PSE-AW, further action can be taken. Enclosed is a list of other offices where these papers may be obtained. Please return this correspondence and all enclosures with your request.

[ ] Release of the information you have requested would be a violation of the Privacy Act of 1974. The information may be released if you furnish a signed authorization from the service member concerned. Please return all of the enclosed with the authorization.

[ ] Service records sent to this Center for filing may require      days to be processed and computer-indexed before they become available for our use. Please resubmit your request      days from the date of this letter.

[ ] In order to process your request, please furnish this office with your written signature and return all of the enclosed.

[X] For requested background information of service member, suggest you contact his unit of assignment.

RICHARD W. PEDERSON  
LTC, GS  
Director, Personnel Services

CAUTION: NOT TO BE USED FOR  
IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT

ANY ALTERATIONS IN SHADED  
AREAS RENDER FORM VOID

DD

FORM  
1 JUL 79

214

PREVIOUS EDITIONS OF THIS  
FORM ARE OBSOLETE.

CERTIFICATE OF RELEASE OR DISCHARGE  
FROM ACTIVE DUTY

1. NAME (Last, first, middle)

BOUDREAU, KENNETH JOSEPH

2. DEPARTMENT, COMPONENT AND BRANCH  
USAR

3. SOCIAL SECURITY NO.

4a. GRADE, RATE OR RANK

PV1

4b. PAY GRADE

E-1

5. DATE OF BIRTH

60

6. PLACE OF ENTRY INTO ACTIVE DUTY  
CHICAGO, IL

7. LAST DUTY ASSIGNMENT

2

2

2

2

S/

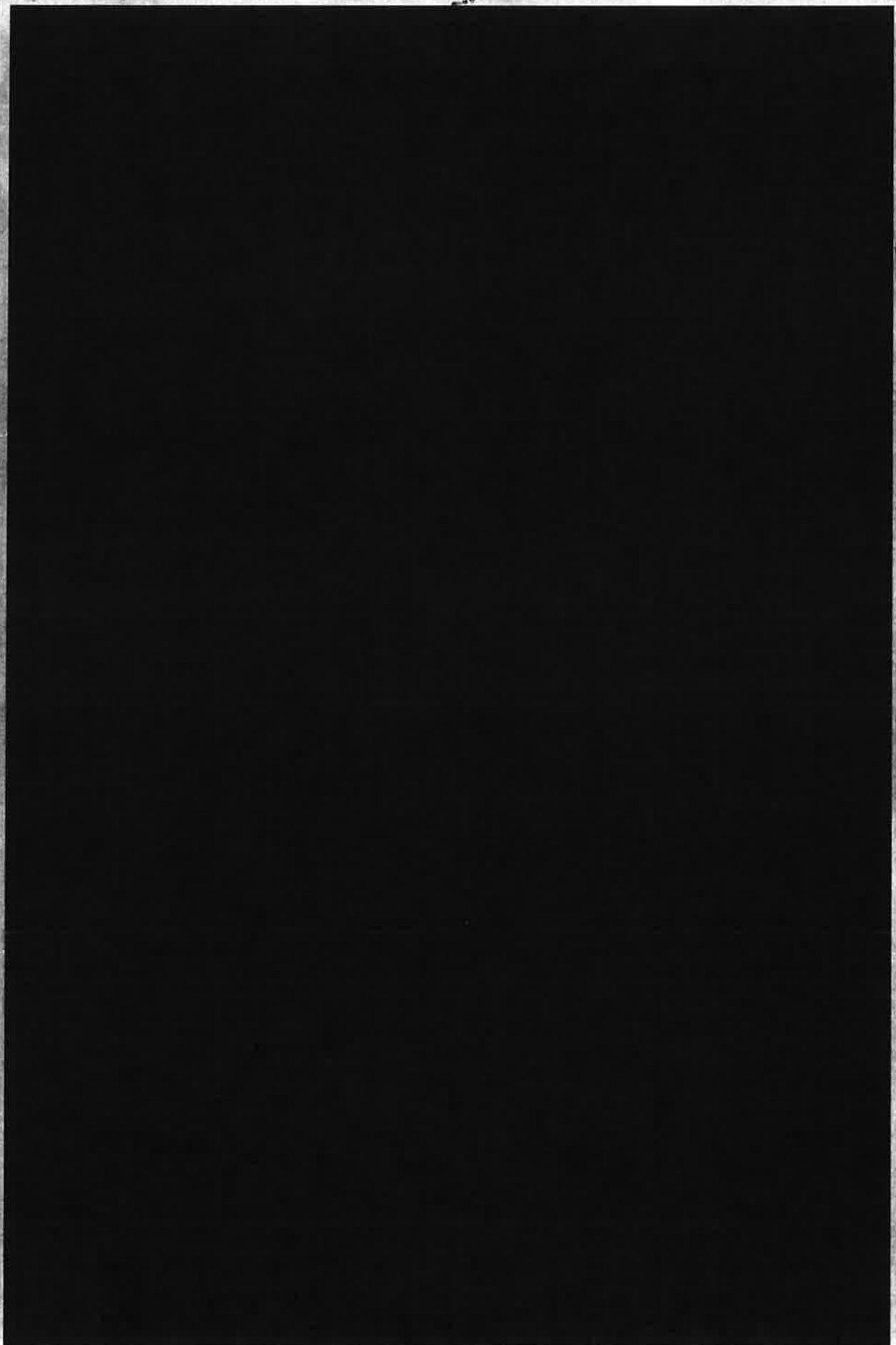


Guidance Department



Thomas B. Szura  
Director of Guidance

TBS:ce



DEPARTMENT OF HEALTH - CITY OF CHICAGO

March 24, 1986

STATE OF ILLINOIS  
COUNTY OF COOK SS  
CITY OF CHICAGO

I, LONNIE C. EDWARDS, M.D., M.P.A.,  
LOCAL REGISTRAR OF VITAL STATISTICS  
OF THE CITY OF CHICAGO, DO HEREBY  
CERTIFY THAT I AM THE KEEPER OF  
THE RECORDS OF BIRTHS, STILLBIRTHS  
AND DEATHS OF THE CITY OF CHICAGO  
BY VIRTUE OF THE LAWS OF THE  
STATE OF ILLINOIS AND THE  
ORDINANCES OF THE CITY OF CHICAGO;  
THAT THE ACCOMPANYING CERTIFICATE  
ON THIS SHEET IS A TRUE COPY AS A  
RECORD KEPT BY ME IN PURSUANCE OF  
SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID  
WHEN MULTICOLOR SEAL AND  
BLUE SIGNATURE ARE AFFIXED

## AUTHORIZATION FOR RELEASE OF PERSONNEL DIVISION/CHICAGO POLICE

## MILITARY &amp; MEDICAL INFORMATION

DATE

UD

INSTRUCTIONS: Please TYPE or PRINT.

APPLICANT: Prepare in duplicate. Complete items No. 1 through 8.

MILITARY BRANCH: Please complete items 9 through 14 and return to:  
Chicago Police Department, Personnel Division/Recruit Processing Section,  
1121 South State Street, Chicago, IL 60605.

23 FEB. 86.

(NAME &amp; ADDRESS OF MILITARY BRANCH)

TO:

1. NAME OF APPLICANT (LAST-FIRST-MIDDLE) <b>BOUDREAU, KENNETH J.</b>	2. PRESENT HOME ADDRESS [REDACTED]
3. BRANCH OF SERVICE <b>U.S. ARMY</b>	4. SERVICE NO. AND/OR SOCIAL SECURITY NO. [REDACTED]
5. DATE SEPARATED FROM ACTIVE SERVICE <b>JANUARY 81</b>	
6. PRESENT MILITARY STATUS <input type="checkbox"/> AIR FORCE RESERVE <input checked="" type="checkbox"/> ARMY RESERVE <input type="checkbox"/> NAVAL RESERVE <input type="checkbox"/> MARINE CORPS RESERVE <input type="checkbox"/> NONE	

As an applicant for a position with the Chicago Police Department, I am required to furnish information for use in determining my moral, physical and mental qualifications. In this connection, I authorize the National Personnel Record Center to release information/copies from my military personnel and medical records, to include any Article 15's or non-judicial punishments, to the City of Chicago Department of Police.

7. APPLICANT FOR POSITION OF <input checked="" type="checkbox"/> POLICE OFFICER <input type="checkbox"/> OTHER (SPECIFY) [REDACTED]	8. SIGNATURE OF APPLICANT [REDACTED]
--	---

## INFORMATION BELOW TO BE FILLED OUT BY MILITARY BRANCH

9. DATE OF ENTRY	DATE SEPARATED	REASON FOR SEPARATION	CHARACTER OF SERVICE
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

10. DISCIPLINARY DATA, IF ANY, INCLUDING DISPOSITION	<input type="checkbox"/> NONE	<input type="checkbox"/> SEE REMARKS	
NON-JUDICIAL PUNISHMENT INCLUDING DISPOSITION	<input type="checkbox"/> NONE	<input type="checkbox"/> SEE REMARKS	
SIGNIFICANT ILLNESSES OR INJURIES, IF ANY	<input type="checkbox"/> NONE	<input type="checkbox"/> SEE REMARKS	<input type="checkbox"/> SEE ATTACHED DOCUMENTS
PSYCHIATRIC OBSERVATIONS AND TREATMENT, IF ANY	<input type="checkbox"/> NONE	<input type="checkbox"/> SEE REMARKS	<input type="checkbox"/> SEE ATTACHED DOCUMENTS
PHYSICAL CONDITION AT TIME OF SEPARATION	<input type="checkbox"/> REPORT OF SEPARATION PHYSICAL ATTACHED		

## 11. REMARKS

12. RELEASING OFFICE	13. RELEASED BY—SIGNATURE	14. DATE RELEASED
----------------------	---------------------------	-------------------

DEPARTMENT OF THE ARMY  
U. S. Army Garrison, Fort Sheridan  
Fort Sheridan, Illinois 60037-5000

ORDERS 89-6

8 May 1991

BOUDREAU, KENNETH [REDACTED] SFC 416th ENCOM (WRXMAA)  
Chicago, IL 60623-2991

You are released from active duty, not by reason of physical disability, and assigned as indicated on date immediately following release from active duty. Any temporary appointments held are terminated on your effective date of release from active duty.

Effective date of release from active duty: 27 May 1991  
Assigned to: 416th ENCOM (WRXMAA) 4454 W. Cermak Rd.,  
Chicago, IL 60623-2991

Terminal date of Reserve obligation: NA

Additional instructions: (a) You are not authorized movement of family members and household goods at government expense. (b) Soldier is authorized transition leave 13 May 1991 thru 27 May 1991.

Accounting classification: FY91 211 2020 74-7434  
P847714.99-211A S23037 W008577MM 02154 B4HU

FOR ARMY USE

HOR: Chicago, IL  
P1 EAD or OAD: Chicago, IL

MDC: NA

Comp: USAR

PEBD: NA

Format: 523

FOR THE COMMANDER:

DISTRIBUTION:  
AFKE-ZO-PA-AG-ME (1)  
AFKE-ZO-DE-H (1)  
AFKE-ZO-PA-AG-ETS (1)  
AFKE-ZO-PA-AG-MX (1)  
AFKE-ZO-PA-AG-PO (1)  
ACS (1)  
SFC BOUDREAU (1)  
Cdr, 416th ENCOM, 4454 W. Cermak Rd., Chicago, IL 60623 (1)



DEPARTMENT OF THE ARMY  
Headquarters, Fourth United States Army  
Fort Sheridan, Illinois 60037-5000

PERMANENT ORDERS 128-2

27 November 1990

The U.S. Army Reserve Unit shown and its members are ordered to active duty under (10 USC 873B) for period shown unless sooner released by proper authority.

Period: One hundred eighty (180) days effective 290530Z Nov 90

Additional Instructions: Unit is ordered to active federal duty effective 29 Nov 90 at its assigned levels of personnel and equipment. Unit will mobilize and move to assigned Mobilization Station (MS) IAW FORSCOM Mobilization Station Planning System (MSPS), unless otherwise directed by CDR FORSCOM. Unit ordered to active duty must be ready to move from Home Station (HS) within three (3) days of effective date of this order. All unit personnel and individuals are ordered to active duty in their current grade and in their present position. All members of unit are ordered to active duty for one hundred eighty (180) days. This order is the HQDA\movement directive. Provisions of AR 55-113 and AR 55-335 apply. Files/records disposition will be IAW DA PAM 25-400-2, para 7-1. Records subject to retirement will be transferred to MUSARC to which unit is currently assigned. Unit Commander will use Format 153 to order to active duty unit personnel and individuals.

SNL of Unit	Effective Date (Home Station)	Effective Date (MOB Station)	MOB Station
-------------	----------------------------------	---------------------------------	-------------

416 EN HHC (WRXMAA) 416 ENCOM 5000 W. Roosevelt Rd. Chicago, IL 60623-2291	29 Nov 90	2 Dec 90	Ft. Sheridan, IL
---	-----------	----------	------------------

FORMAT: 150

FOR THE COMMANDER:

DISTRIBUTION:  
416 EN HHC (1)  
416 ENCOM (1)  
Ft. Sheridan, IL (1)  
CINCFOR, FCJ1 (1)  
ARPERCEN (1)  
AFKE-PR (1)  
AFKE-RM (1)  
AFKE-OP (1)  
AFKE-LG (1)  
Ft. Sheridan, ATTN: AFKE-ZD-PTM



009th District

29MAR90

TO: John Madden  
Supervisor, Personnel Division

FROM: P.O. Kenneth J. Boudreau #17998, EMP [REDACTED]  
009th District Tactical Team

SUBJECT: Personnel File

1. 1. Please find attached diplomas from various training programs achieved through external sources, Military awards that support these diplomas and awards from my previous employment as a Police Officer from another jurisdiction.

2. Please review these documents and any that can be placed in my file please do so. The items that cannot, please destroy same. I thank you in advance for time and consideration in this matter. I hope that most of these items can be placed into the file to further enhance any possible career opportunities. Respectfully;

[REDACTED]

---

P.O. Kenneth J. Boudreau #17998

Approval:

[REDACTED]

PERSONNEL DIVISION

DATE 31 May 1991

TO: Dr. Bransfield, Medical Director  
Medical Section

ATTENTION: Lt. Robert Walker

FROM: Rita Zimmermann, Ass't. Director/Personnel Svcs.  
Personnel Division

SUBJECT: REQUEST FOR DRUG SCREEN

Kenneth Boudreau, Star #17998 is seeking to return to duty in his/her former position of P. O. Assigned as Detective after having been on military leave of absence for Desert Storm. This person has been off the active rolls of the Department since 26 February 1991.

He has been instructed to report to the Medical Services Section on 31 May 1991. Please conduct the drug screen. Please advise this office of the results of any examination as soon as possible.

[Redacted]  
Rita Zimmermann  
Ass't. Director/Personnel Svcs.  
Personnel Division

**PERSONNEL ACTION REQUEST**  
CHICAGO POLICE DEPARTMENT

MEMBER TO BE AFFECTED (LAST NAME—FIRST—M.I.)

Boudreau, Kenneth

EFFECTIVE DATE

JOB TITLE

P.P.O.

TODAY'S DATE  
STAR/BADGE NO.

02 MAR 87

EMPLOYEE NO.

INIT ASSIGNED

SOCIAL SECURITY NO.

009

ROUTING  
PERSONNEL DIV.  
USE ONLY

704-1

EMPLOYMENT	RECORDS
CLASS, & PAY	
BONDS & INSUR.	JACKET FILE
TERMINAL OPERATIONS	MEDICAL

TYPE OF ACTION

CHECK TYPE OF ACTION HERE (DO NOT CHECK MORE THAN ONE)	INFORMATION REQUIRED (SPECIFY IN "REMARKS SECTION" BELOW)	SIGNATURES REQUIRED	
EXCUSED WITHOUT PAY—DISCIPLINARY	GIVE DATE ACTION IS EFFECTIVE, CIRCUMSTANCES AND C.R. NO.	UNIT C.O.	
EXCUSED WITHOUT PAY—NON-DISCIPLINARY	GIVE DATE ACTION IS EFFECTIVE AND CIRCUMSTANCES	UNIT C.O.	
LEAVE, DISABILITY PENSION (DUTY RELATED)	ATTACH MEDICAL REPORTS (COMPLETE REVERSE SIDE)	MEMBER, CHIEF POLICE SURGEON	
LEAVE, DISABILITY PENSION (NON-DUTY RELATED)	ATTACH MEDICAL REPORTS (COMPLETE REVERSE SIDE)	MEMBER, CHIEF POLICE SURGEON	
LEAVE, MILITARY (ANNUAL ENCAMPMENT—14 DAYS MAX.)	GIVE DATES, ATTACH COPY OF OFFICIAL ORDERS (COMPLETE REVERSE SIDE)	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O.	
LEAVE, MILITARY—WITHOUT PAY	GIVE DATES, ATTACH COPY OF OFFICIAL ORDERS (COMPLETE REVERSE SIDE)	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O.	
LEAVE, OTHER (29 DAYS AND UNDER)	GIVE REASON AND RETURN DATE (COMPLETE REVERSE SIDE)	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O.	
LEAVE, OTHER (30 DAYS AND OVER)	GIVE REASON & LENGTH OF LEAVE REQUESTED (COMPLETE REVERSE SIDE). ATTACH PER-73, CITY REQUEST FOR LEAVE, AND PER-78, EXIT INTERVIEW REPORT	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O., DEP. SUPT.—B.A.S.	
LEAVE, EXTENSION OF	GIVE DATES & REASON (COMPLETE REVERSE SIDE). ATTACH PER-73, CITY REQUEST FOR LEAVE	MEMBER	
MARRIAGE LEAVE	GIVE DATES REQUESTED FOR LEAVE, DATE OF CEREMONY & SPOUSE'S NAME	MEMBER, UNIT C.O.	
NAME CHANGE	GIVE NEW NAME, IF OTHER THAN BY MARRIAGE, ATTACH VERIFICATION	MEMBER, UNIT C.O.	
RESIGNATION TO ACCEPT RETIREMENT/PENSION	GIVE DATE	ATTACH PER-78, EXIT INTERVIEW REPORT, AS SOON AS RESIGNATION IS ACTED ON BY THE COMMANDING OFFICER, THE COMMANDING OFFICER WILL NOTIFY THE INTERNAL AFFAIRS DIV. & PAYROLL/FINANCE DIV. BY FAX PHONE.	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O.
RESIGNATION	GIVE DATE AND REASON	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O.	
RECOGNIZED OPENING BID	COMPLETE PERSONNEL TRANSFER & ASSIGNMENT SECTION BELOW	MEMBER	
RECOGNIZED VACANCY BID	COMPLETE PERSONNEL TRANSFER & ASSIGNMENT SECTION BELOW	MEMBER	
TRANSFER REQUEST	COMPLETE PERSONNEL TRANSFER & ASSIGNMENT SECTION BELOW	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O., DEP. SUPT.	

REMARKS SECTION

DATES REQUESTED: 13, 14, 15 APRIL 87, D.O. GROUP #1

PERSONNEL TRANSFER & ASSIGNMENT SECTION

UNIT OF ASSIGNMENT REQUESTED	HOME ADDRESS	HOME TELEPHONE NO.	SENIORITY DATE	TITLE CODE	GRADE
DATE ASSIGNED TO PRESENT UNIT	DATE OF BIRTH	UNIT NOTICE OF RECOGNIZED OPENING NO.: <input type="checkbox"/> RECOGNIZED VACANCY LISTING TELETYPE MESSAGE NO.:			POSITION REQUESTED

SIGNATURES

RECOMMEND APPROVAL  
 DISAPPROVAL

SIGNATURE & TITLE

RECOMMEND APPROVAL  
 DISAPPROVAL

SIGNATURE & TITLE

FOR PERSONNEL DIVISION/BUREAU OF ADMINISTRATIVE SERVICES USE ONLY

APP  
DIR

RECEIVED  
RECEIVED  
RECEIVED

RECOMMEND APPROVAL  
 DISAPPROVAL

SIGNATURE

COMMENTS  MEMBER NOTIFIED OF LEAVE RETURN POLICY

D. CLEARANCE  
OF:



United States Army  
John F. Kennedy  
Special Warfare Center and School



TO ALL WHO SHALL SEE THESE PRESENTS GREETING  
BE IT KNOWN THAT SSG KENNETH J. BOUDREAU, [REDACTED] HAS

Completed  
THE  
ANTI-TERRORISM INSTRUCTOR QUALIFICATION COURSE (5K-F5/012-F30)  
12-Mar-90 - 22-Mar-90

U.S. Army  
John F. Kennedy Special Warfare Center and School

IN TESTIMONY WHEREOF, AND BY AUTHORITY VESTED IN US, WE DO CONFER UPON THE INDIVIDUAL THIS

Certificate

ATTEST: GIVEN AT FORT BRAGG, NORTH CAROLINA THIS 22D DAY OF MARCH 1990

[REDACTED]  
ASSISTANT COMMANDANT

United States Army

Military Police School



To all who shall see these presents greeting  
This is to certify that

KENNETH J. BOUDREAU

has successfully completed the

CONVENTIONAL PHYSICAL SECURITY COURSE

CLASS 501-85

In Testimony Whereof, and by the authority  
vested in us. We do confer this

Diploma

Given at Fort McClellan, Alabama,



Brigadier General, USA  
Commandant

United States Army

Military Police School



To all who shall see these presents greeting  
This is to certify that

KENNETH J BOUDREAU

has successfully completed the

COUNTERING TERRORISM  
CLASS 004-86, 13-Jan-86 - 17-Jan-86

In Testimony Whereof, and by the authority  
vested in us. We do confer this

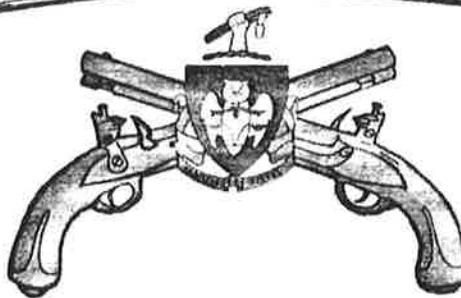
Diploma

Given at Fort McClellan, Alabama 17 JANUARY 1986

Brigadier General, USA  
Commandant

United States Army

Military Police School



To all who shall see these presents greeting  
This is to certify that

KENNETH J BOUDREAU

has successfully completed the

BASIC MILITARY POLICE COURSE  
(95B10-OSUT)  
CLASS 002-81, 18-Oct-80 - 02-Feb-81

In Testimony Whereof, and by the authority  
vested in us. We do confer this

Diploma

Given at Fort McClellan, Alabama, 2 FEBRUARY 81

Brigadier General, USA  
Commandant



DEPARTMENT OF THE ARMY  
CERTIFICATE OF TRAINING

This is to certify that

SGT KENNETH J. BOUDREAU

has successfully completed

416TH ENGINEER COMMAND ANTI-TERRORISM SCHOOL/12 Hours

Given at Chicago, IL  
23-24 August 1986

  
GAINES B. HALL  
AC/S Intelligence  
416th Engineer Command



DEPARTMENT OF THE ARMY  
CERTIFICATE OF TRAINING

This is to certify that

SGT BOUDREAU, KENNETH J.

has successfully completed

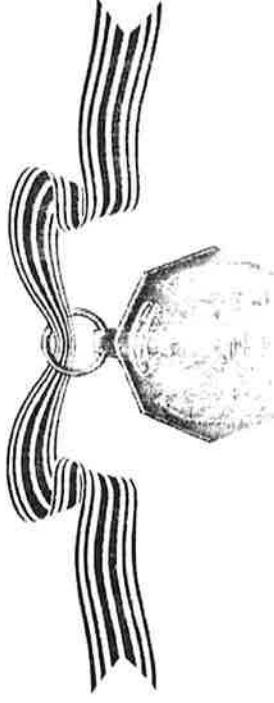
416TH ENGINEER COMMAND'S 16 HOUR

FIRST LINE SUPERVISOR RETENTION TRAINING COURSE

29 - 30 JUNE 1985

Given at \_\_\_\_\_ ROSEMONT, IL

LINLEY C. HAWTHORNE  
MAJ, AV  
STRENGTH MANAGEMENT OFFICER



DEPARTMENT OF THE ARMY  
THIS IS TO CERTIFY THAT THE SECRETARY OF THE ARMY HAS AWARDED  
**THE ARMY ACHIEVEMENT MEDAL**

TO STAFF SERGEANT KENNETH JOSEPH BOUDREAU

FOR MERITORIOUS SERVICE DURING THE PERIOD OF 1 OCTOBER 1987 THROUGH 30 APRIL 1988. WHILE ASSIGNED TO THE PHYSICAL SECURITY SECTION OF THIS COMMAND, STAFF SERGEANT BOUDREAU PROVIDED DIRECT PHYSICAL SECURITY SUPPORT AT FOUR (4) SEPARATE COMMAND CONFERENCES. THIS SERVICE MEMBER PROVIDED THE MOST CURRENT AND ACCURATE DISSEMINATION OF INFORMATION THROUGH FORMAL CLASS PRESENTATIONS AND, AS A SIMULTANEOUS ACTIVITY, WAS INVOLVED IN ON-SITE SECURITY OPERATIONS FOR THESE ACTIVITIES. SSG BOUDREAU'S PROFESSIONAL KNOWLEDGE AND DISTINGUISHED PERFORMANCE REFLECTS GREAT CREDIT UPON HIMSELF, THE \*416TH ENGINEER COMMAND AND THE UNITED STATES ARMY RESERVE.

GIVEN UNDER MY HAND IN THE CITY OF WASHINGTON  
THIS 15TH DAY OF MAY 1988

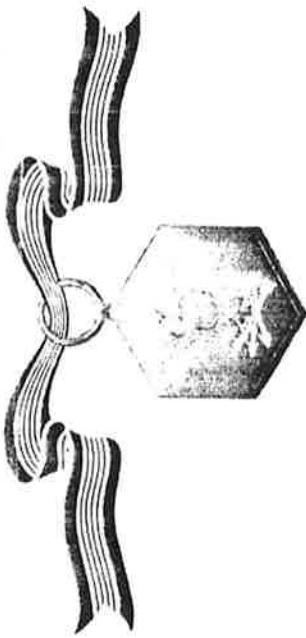


[Redacted]

MARK W. TENNEY  
MAJOR GENERAL, USA  
COMMANDING

SECRETARY OF THE ARMY

[Redacted]



# DEPARTMENT OF THE ARMY

THIS IS TO CERTIFY THAT THE SECRETARY OF THE ARMY HAS AWARDED  
**THE ARMY COMMENDATION MEDAL**

TO

SERGEANT KENNETH J. BOUDREAU

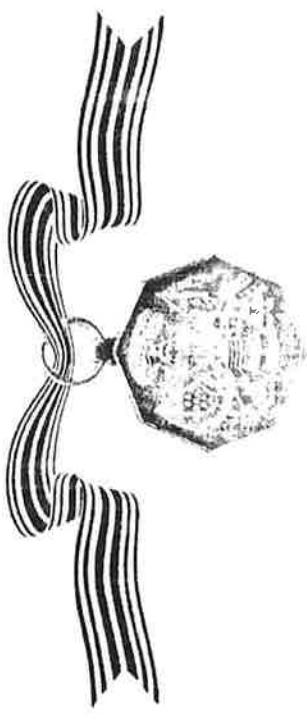
FOR SERGEANT BOUDREAU HAS DISTINGUISHED HIMSELF WHILE SERVING AS A SECURITY TEAM CHIEF WITH THE PHYSICAL SECURITY SECTION OF THIS COMMAND DURING THE PERIOD 1 OCTOBER 1984 THROUGH 30 SEPTEMBER 1987. HE HAS HAD PERSONAL INVOLVEMENT IN 44 STAFF ASSISTANCE VISITS COMPLETED BY HIS SECTION, 6 JOINT CONFERENCE ACTIVITIES INVOLVING PHYSICAL SECURITY AND 3 SEPERATE COURSES OF INSTRUCTION, PROVIDED TO UNITS OF THIS COMMAND, IN THE ANTI-TERRORISM CATEGORY. SERGEANT BOUDREAU HAS WORKED DILIGENTLY WITH HIS SECTION AND OTHERS WITHIN THE COMMAND AND HAS SUCCEEDED IN THE ENHANCEMENT OF THEIR OVERALL POSTURE AND ADAPTABILITY TOWARDS PHYSICAL SECURITY.

GIVEN UNDER MY HAND IN THE CITY OF WASHINGTON  
THIS 8TH DAY OF SEPTEMBER 1987

[Redacted]  
MARK W. TENNEY  
BRIGADIER GENERAL, USA  
COMMANDING



SECRETARY OF THE ARMY



# DEPARTMENT OF THE ARMY

THIS IS TO CERTIFY THAT THE SECRETARY OF THE ARMY HAS AWARDED  
**THE ARMY ACHIEVEMENT MEDAL.**

TO

SERGEANT KENNETH J. BOUDREAU

FOR MERITORIOUS SERVICE FROM PERIOD 22 MARCH 1986 UNTILL 22 MARCH 1987 WHILE SERVING WITH THE PHYSICAL SECURITY TEAM 416TH ENGINEER COMMAND. SERGEANT BOUDREAU DEMONSTRATED EXTRAORDINARY PROFESSIONAL COMPETENCE AND MATURE JUDGEMENT IN PERFORMING HIS INTRICATE RESPONSIBILITIES IN AN DISTINCLY OUTSTANDING MANNER. HIS EXPERTISE IN PHYSICAL SECURITY PROVIDED THIS HEADQUARTERS WITH NECESSARY INFORMATION TO PROVIDE ON SITE SECURITY. SERGEANT BOUDREAU'S PROFESSIONAL KNOWLEDGE AND DISTINGUISHED PERFORMANCE REFLECTS GREAT CREDIT UPON HIMSELF, 416TH ENGINEER COMMAND AND THE UNITED STATES ARMY RESERVE.

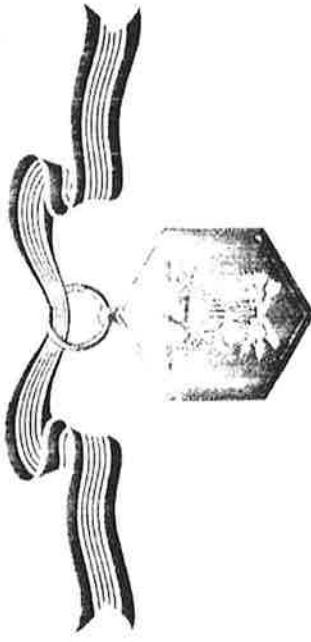
GIVEN UNDER MY HAND IN THE CITY OF WASHINGTON  
THIS 18TH DAY OF APRIL 1987



MARK W. TENNEY  
BRIGADIER GENERAL, USA  
COMMANDING

SECRETARY OF THE ARMY





# DEPARTMENT OF THE ARMY

THIS IS TO CERTIFY THAT THE SECRETARY OF THE ARMY HAS AWARDED  
THE ARMY COMMENDATION MEDAL

TO

STAFF SERGEANT KENNETH JOSEPH BOUDREAU

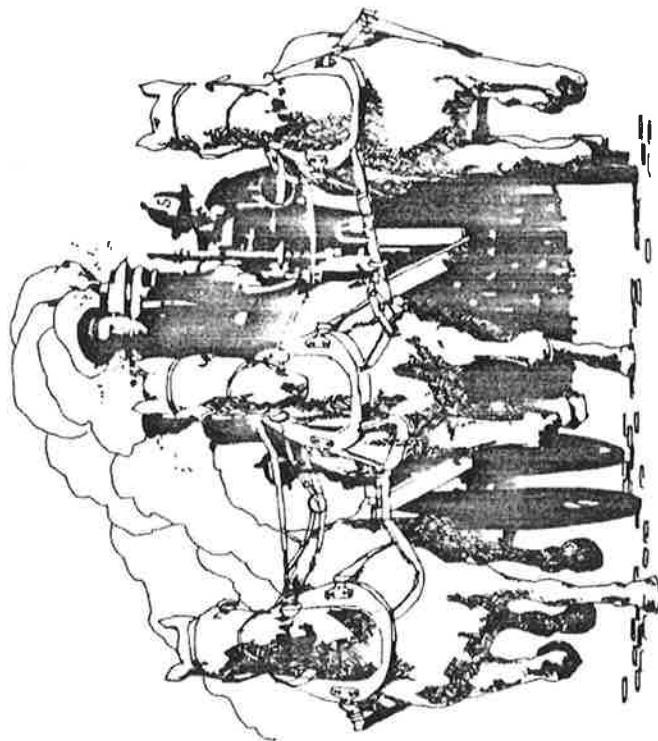
FOR EXCEPTIONAL MERITORIOUS SERVICE WHILE ASSIGNED AS SECURITY TEAM CHIEF, PHYSICAL SECURITY SECTION, 416TH ENGINEER COMMAND, FROM 1 FEBRUARY 1984 TO 30 SEPTEMBER 1988. THROUGHOUT THIS PERIOD, STAFF SERGEANT BOUDREAU PERFORMED HIS DUTIES IN AN EXEMPLARY MANNER. HE WAS PERSONALLY RESPONSIBLE FOR THE CONDUCT OF MORE THAN THIRTY (30) STAFF ASSISTANCE VISITS TO SUBORDINATE UNITS OF THIS COMMAND. HE ADDITIONALLY PROVIDED EXPERT ASSISTANCE AND SUPPORT TO PHYSICAL SECURITY REQUIREMENTS OF HEADQUARTERS COMPANY, THIS COMMAND AND FOR COMMAND SPONSORED CONFERENCES. STAFF SERGEANT BOUDREAU'S OUTSTANDING PERFORMANCE OF DUTY REFLECTS GREAT CREDIT UPON HIMSELF, HIS UNIT AND THE UNITED STATES ARMY.

GIVEN UNDER MY HAND IN THE CITY OF WASHINGTON  
THIS 9TH DAY OF NOVEMBER 1988



MARK W. TENNEY  
MAJOR GENERAL, USAR  
COMMANDING

# NORTH PALOS FIRE PROTECTION DISTRICT



*This Certifies that*

KENNETH J. BOUDREAU

Successfully attended & completed Explosive Recognition Class

Authority of

Date May 16, 1985



Cook County Bomb Squad

CITY OF PALOS HILLS POLICE DEPARTMENT

Certificate of Completion,  
Palos Hills Cadet Program

awarded to

KENNETH J. BOUDREAU

FOR PARTICIPATION IN THE  
TWO YEAR STATE APPROVED CADET PROGRAM  
SPONSORED BY THE PALOS HILLS POLICE DEPARTMENT

Dated 1 JANUARY 1981

[Redacted]  
DANIEL HURLEY, Chief



RICHTON PARK  
POLICE DEPARTMENT



CERTIFICATE OF TRAINING

THIS IS TO CERTIFY THAT

KENNETH BOUDREAU

HAS COMPLETED A 8 HOUR COURSE IN

DISPATCHER'S ROLE IN OFFICER SURVIVAL

[Redacted]

CHIEF OF POLICE

ILLINOIS DEPARTMENT  
OF LAW ENFORCEMENT



LAW ENFORCEMENT AGENCIES DATA SYSTEM

THIS CERTIFIES THAT

KENNETH J. BOUDREAU

SUCCESSFULLY COMPLETED THE ACADEMIC REQUIREMENTS OF THE ILLINOIS LAW  
ENFORCEMENT AGENCIES DATA SYSTEMS (LEADS) OPERATOR CERTIFICATION  
SCHOOL ON NOVEMBER 15, 1979 AS EVIDENCED BY A SATISFACTORY  
SCORE ON THE PRESCRIBED EXAMINATION.

NOVEMBER 15, 1981  
*EXPIRES*

[REDACTED]  
*TRAINING ADMINISTRATOR*

[REDACTED]  
*CERTIFICATION NUMBER*

[REDACTED]  
*LEADS ADMINISTRATOR*

[REDACTED]  
*DIRECTOR, Department of Law Enforcement*

# NEMEG

Northeastern Metropolitan Enforcement Group

## Certificate of Training

This is to certify that Officer Kenneth Boudreau

has successfully completed 3 hours instruction in

Narcotic and Dangerous Drug Law Enforcement

and has satisfactorily demonstrated his/her proficiency in said training.

at Palos Hills, Illinois during March 23, 1982.

Director, NEMEG

Training Coordinator

FOREST PRESERVE DISTRICT OF COOK COUNTY  
DEPARTMENT OF LAW ENFORCEMENT

# Certificate of Completion



[REDACTED] GENERAL SUPERINTENDENT

[REDACTED] CHIEF [REDACTED] TRAINING COORDINATOR

REPRODUCED AT GOVERNMENT EXPENSE

# Cook County Sheriff's Police Department

This is to Certify that  
*Cook County*  
KENNETH J. BOUDREAU  
has satisfactorily completed the  
"Basic Recruit Training Program"  
and is hereby presented this  
**CERTIFICATE**

Given in Cook County, Illinois, this 10th  
day of June 1983



[Redacted]  
Sheriff  
[Redacted]  
Chief  
[Redacted]  
Director of Training



## PALOS HILLS POLICE DEPARTMENT

In Conjunction With

## CALIBRE PRESS, INC.



To all persons to whom these presents may come, greetings:

THIS IS TO CERTIFY THAT

KENNETH BOUDREAU

PALOS HILLS POLICE DEPARTMENT

has satisfactorily completed the  
studies and requirements of the prescribed  
course of instruction

### STREET SURVIVAL: TACTICS FOR ARMED ENCOUNTERS

Awarded at Palos Hills, Illinois, this 6th day of November, 1981

[Redacted]

CHARLES REMSBERG  
President  
Calibre Press, Inc.

DANIEL J. HURLEY  
Chief of Police  
Palos Hills Police Department



Swanson  
SGT.

Date 31 OCT 95

Bon Journe

### **ACKNOWLEDGEMENT OF RESPONSIBILITY**

I Kenneth Boureau do hereby acknowledge receipt of a Chicago Police Department photo identification card. I understand that I am bound by all Department directives regarding the possession, display and use of this card.

Signature \_\_\_\_\_

Print Name Kenneth J. Boureau

SS# \_\_\_\_\_ Unit 610

#### **EMERGENCY NOTIFICATION UPDATE CHICAGO POLICE DEPARTMENT**

UNIT OF ASSIGNMENT | JOB TITLE

610

Detective

DATE

25 Aug 98

INSTRUCTIONS: PLEASE TYPE OR PRINT

MEMBER'S NAME (LAST - FIRST - M.I.)	STAR/BADGE NO.	EMPLOYEE NO.	SOCIAL SECURITY NO.
<u>Boureau, Kenneth J</u>	<u>20435</u>		

#### **PRIMARY EMERGENCY NOTIFICATION**

**EMERGENCY NOTIFICATION UPDATE**  
CHICAGO POLICE DEPARTMENT

UNIT OF ASSIGNMENT      JOB TITLE  
606      Det.

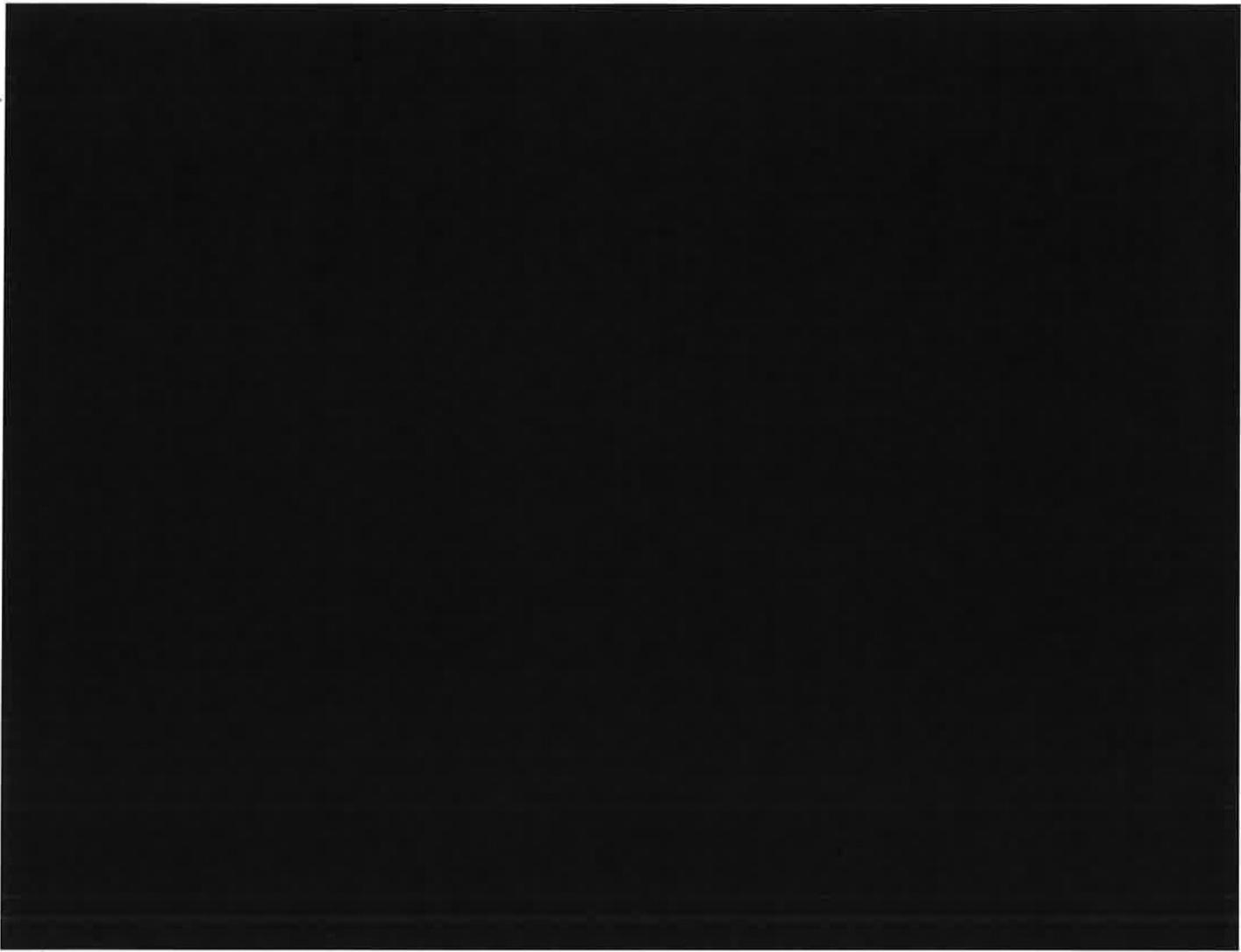
DATE  
3/31/01

INSTRUCTIONS: PLEASE TYPE OR PRINT

MEMBER'S NAME (LAST - FIRST - M.I.) <u>BONDREAU, Kenneth J</u>	STAR/BADGE NO. <u>20435</u>	EMPLOYEE NO. [REDACTED]	SOCIAL SECURITY NO. [REDACTED]
---	--------------------------------	----------------------------	-----------------------------------

PRIMARY EMERGENCY NOTIFICATION





NAME (LAST - FIRST - M.I.)

BOUDREAU, KENNETH

DATE OF BIRTH

[REDACTED] 60

SEX

MALE

SOCIAL SECURITY NO.

In keeping with EEO (Equal Employment Opportunity) Guidelines, it is requested that each applicant complete the following information. This data will be maintained separately from applicant files.

DATE

14 JULY 86

RACE -

 X - WHITE     N - BLACK     I - AMERICAN INDIAN S - SPANISH - SURNAME AMERICAN, CUBAN, MEXICAN, PUERTO RICAN O - ORIENTAL, ASIAN, PACIFIC ISLANDER

EDUCATION - CIRCLE HIGHEST GRADE COMPLETED

1 2 3 4 5 6 7 8 - 9 10 11 12 - 13  14 15 16 - OTHER

## FOR PERSONNEL DIVISION USE ONLY

EEO CATEGORY - POSITION/JOB GROUP APPLIED FOR

HANDICAP

 YES NO

SOURCE

DISPOSITION

APPLICANT'S STATUS

DATE HIRED

POSITION HIRED FOR

CPD-62.201 (4/83)

APPLICANT FLOW DATA / PERSONNEL DIVISION

INTERVIEWER'S SIGNATURE

STATE OF ILLINOIS  
County of Cook  
CITY OF CHICAGO

STAR 4796

I, Kenneth J. Boudreau  
(PRINT)  
having been appointed to the  
office of Police Officer  
do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Illinois, and that I will faithfully discharge the duties of the office of such, according to the best of my ability.

Subscribed and sworn to before me, this

26 day of Sept 1986

SIGNATURE

ADDRESS

(PRINT)

CHGO, ILL

NOTARY PUBLIC

DEPARTMENT OF PERSONNEL  
CITY OF CHICAGO

TO: DEPT OF POLICE  
RE: BOUDREAU, KENNETH  
[REDACTED]

THE ABOVE EMPLOYEE HAS ATTAINED CORRALA SERVICE STATUS  
AS OF 07/14/07 IN THE TITLE OF POLICE OFFICER

INFO  
ENTERED  
JUL 16 2008

JESSE S. HOSKINS  
COMMISSIONER OF PERSONNEL

TYPE ALL DATA - FOR SIGNATURES USE BALL POINT PEN - PRESS HARD

04-258

PERSONNEL ACTION REPORT

INITIALS

EFF DATE

4-1-04

SOC SEC NO

[REDACTED]  
DEPT Police

EMP NAME

BOUDREAU, Kenneth J.

ACTION

Sep. CS & Promotion

TITLE FROM

P.O. assgn as Detective

TO

Sergeant

Kenneth J. Boudreau

Name (Print)

SSN

Detective

9165

Title

Code No.

Police

1180

Employing Department

Payroll No.

60638

Zip

Home Address

14 Jul 86 25 Feb 91

25 Feb 91

Starting Date  
with City

Last Day  
Worked

Last Day on  
Payroll

Salary at time of separation \$ \_\_\_\_\_

Vacation Pay after Last Day Worked, if any

\$ \_\_\_\_\_ From \_\_\_\_\_ Thru \_\_\_\_\_

Name of Immediate Supervisor

Telephone No.

White Copy-Department of Personnel Yellow Copy-Employing Department Pink Copy-Employee

COMPLETE ONLY IF EMPLOYEE IS LEAVING CITY SERVICE

DATE 28 Nov 91

## EXIT INTERVIEW REPORT

Employee's Reason for Leaving: Check most appropriate reason

### \*VOLUNTARY

- |   |   |   |
|---|---|---|
| 01 <input type="checkbox"/> Other employment        | 06 <input type="checkbox"/> Retirement                | 11 <input type="checkbox"/> Working Conditions      |
| 02 <input type="checkbox"/> AWOL - No reason Given  | 07 <input type="checkbox"/> Marriage                  | 12 <input type="checkbox"/> Promotional opportunity |
| 03 <input type="checkbox"/> Family Responsibilities | 08 <input type="checkbox"/> Maternity                 | 13 <input type="checkbox"/> Compensation            |
| 04 <input type="checkbox"/> Return to School        | 09 <input type="checkbox"/> Relocation                | 14 <input type="checkbox"/> Hours                   |
| 05 <input type="checkbox"/> Military service        | 10 <input type="checkbox"/> Leave of Absence-Personal | 15 <input type="checkbox"/> Supervision             |

Dissatisfaction with:

Other Leave of Absence/Military

### \*INVOLUNTARY

- 30  Violation of City Personnel Rule \_\_\_\_\_, Section \_\_\_\_\_  
Paragraph \_\_\_\_\_, as noted \_\_\_\_\_  
55  Discontinuation of Function  
56  Reduction in Force  
57  Lay Off - Seasonal  
58  Compulsory Retirement  
 Other \_\_\_\_\_

Former CETA employee?  Yes  No  
If yes, when? \_\_\_\_\_ to \_\_\_\_\_

Additional comments required Requesting member ordered to Federal Active Duty in response to Operation Desert Shield, deployed to Saudi Arabia 11 Nov 90. Member has exhausted all vacation time due, personal, military leave & non-personnel leave.		
Interviewer Signature	Title	Tel. No.
Employer		

Revised 1/80

PER070

City of Chicago  
Department of Personnel  
Room 1100 — City Hall  
121 N. LaSalle Street  
Chicago, Illinois 60602

## PERSONNEL DATA FORM

FOR OFFICE USE:

PLEASE PRINT • PRESS FIRMLY

NAME	LAST	FIRST	M.I.	BIRTHDATE	DRIVER'S LICENSE NO.	SEX
BOGDANOV	KAREN	ELIZABETH		12/12/30	744-8310	MALE <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/>
PRESENT ADDRESS				City	State	Zip
Ann. No. or Rec. No. _____ Date _____						

NAME	LAST	FIRST	M.I.	BIRTHDATE	DRIVER'S LICENSE NO.	SEX
BOGDANOV	KAREN	ELIZABETH		12/12/30	744-8310	MALE <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/>
PRESENT ADDRESS				City	State	Zip
Ann. No. or Rec. No. _____ Date _____						

City of Chicago  
Department of Personnel  
Room 1100 — City Hall  
121 N. LaSalle Street  
Chicago, Illinois 60602

## PERSONNEL DATA FORM

FOR OFFICE USE:

PLEASE PRINT • PRESS FIRMLY

NAME <u>Boudreau</u> Last:	<u>Karen</u> First:	<u>M.I.</u>	SOCIAL SECURITY NUMBER [REDACTED]	WORK PHONE 744-8280	BIRTHDATE [REDACTED] 60	MALE <input checked="" type="checkbox"/>	FEMALE <input type="checkbox"/>
PRESENT ADDRESS [REDACTED]				DRIVERS LICENSE NO. [REDACTED]			

DATE 31 May 91

AN EQUAL OPPORTUNITY—AFFIRMATIVE ACTION EMPLOYER  
PER-63 REV 8/81

SIGNATURE

**PERSONNEL ACTION REQUEST**  
**CHICAGO POLICE DEPARTMENT**

TODAY'S DATE

13 MAY 05

MEMBER TO BE AFFECTED (LAST NAME - FIRST - M.I.)  
BOUDREAU, Kenneth J.

STAR/BADGE NO.  
852

UNIT ASSIGNED  
196

EFFECTIVE DATE

JOB TITLE

20 May 05

Police Sergeant

SOC

CHECK TYPE OF ACTION HERE (DO NOT CHECK MORE THAN ONE)		TYPE OF ACTION (ENTER INFORMATION IN "REMARKS SECTION" BELOW)	SIGNATURES REQUIRED
EXCUSED WITHOUT PAY - DISCIPLINARY		GIVE EFFECTIVE DATE , CIRCUMSTANCES & C.R. NO	UNIT C.O.
EXCUSED WITHOUT PAY - NON-DISCIPLINARY		GIVE EFFECTIVE DATE & CIRCUMSTANCES	UNIT C.O.
ABSENCE WITHOUT PAY - AWOP		GIVE EFFECTIVE DATE & CIRCUMSTANCES STATE WHETHER OR NOT MEMBER NOTIFIED SUPERVISOR	UNIT C.O.
TERMINATION - JOB ABANDONMENT		GIVE EFFECTIVE DATE: F.O.P. - ACTION TAKEN AFTER 4 CONSECUTIVE WORKDAYS AWOP AFSCME & UNIT II - ACTION TAKEN AFTER 5 CONSECUTIVE WORKDAYS AWOP	UNIT C.O. , AREA CHIEF OR DIVISION C.O
LEAVE, DISABILITY PENSION - SWORN ONLY		ATTACH MEDICAL REPORTS ,COMPLETE REVERSE SIDE.	MEMBER, MEDICAL DIRECTOR
LEAVE, MILITARY (PAID ENCLAMPMT- 14 DAYS MAX.)		GIVE DATES, ATTACH COPY OF OFFICIAL ORDER , COMPLETE REVERSE SIDE.	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O
LEAVE, MILITARY - WITHOUT PAY		GIVE DATES, ATTACH COPY OF OFFICIAL ORDERS, COMPLETE REVERSE SIDE IF OVER 29 DAYS, ALSO ATTACH PER-73 ( CITY REQUEST FOR LEAVE) AND PER-78 ( EXIT INTERVIEW REPORT)	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O
UNPAID ABSENCE (29 DAYS AND UNDER) - NO INSURANCE BENEFITS		GIVE REASON & RETURN DATE ,COMPLETE AND SIGN REVERSE SIDE	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O
LEAVE, OTHER (30 DAYS AND OVER)		GIVE REASON & LENGTH OF LEAVE REQUESTED, COMPLETE REVERSE SIDE . ATTACH PER-73, (CITY REQUEST FOR LEAVE) AND PER-78 ( EXIT INTERVIEW REPORT)	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O., DEP. Supt., B.A.S
LEAVE, EXTENSION OF		GIVE DATES & REASON, COMPLETE REVERSE SIDE. ATTACH PER-73 ( CITY REQUEST FOR LEAVE)	MEMBER
MARRIAGE LEAVE		GIVE DATES REQUESTED FOR LEAVE, DATE OF CEREMONY & SPOUSE'S NAME	MEMBER, UNIT C.O.
NAME CHANGE		GIVE NEW NAME IF OTHER THAN BY MARRIAGE, ATTACH VERIFICATION / EXPLANATION	MEMBER, UNIT C.O.
RETIREMENT	GIVE EFFECTIVE DATE	ATTACH PFR-7R (EXIT INTERVIEW REPORT) AS SOON AS RESIGNATION IS ACTED ON BY THE COMMANDING OFFICER,	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O
RESIGNATION	GIVE EFFECTIVE DATE & REASON	THE COMMANDING OFFICER WILL NOTIFY THE INTERNAL AFFAIRS DIVISION AND THE PAYROLL / FINANCE DIVISION BY PAX TELEPHONE	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O.
SEPARATION TO ACCEPT OTHER CITY POSITION / TITLE		GIVE EFFECTIVE DATE, NEW JOB TITLE & NAME OF NEW CITY DEPARTMENT	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O.
DEATH IN FAMILY		GIVE DATES & RELATIONSHIP TO DECEASED	UNIT C.O.
TRANSFER REQUEST		COMPLETE PERSONNEL TRANSFER & ASSIGNMENT SECTION BELOW	MEMBER, UNIT C.O., AREA CHIEF OR DIVISION C.O., DEP. Supt.
RECOGNIZED OPENING BID (FOP)		COMPLETE PERSONNEL TRANSFER & ASSIGNMENT SECTION BELOW	MEMBER
RECOGNIZED VACANCY BID (FOP)		COMPLETE PERSONNEL TRANSFER & ASSIGNMENT SECTION BELOW	MEMBER

**PERSONNEL TRANSFER & ASSIGNMENT SECTION**

UNIT OF ASSIGNMENT REQUESTED	HOME ADDRESS	HOME TELEPHONE NO	SENIORITY DATE	TITLE CODE	GRADE
DATE ASSIGNED TO PRESENT UNIT	DATE OF BIRTH	<input type="checkbox"/> UNIT NOTICE OF RECOGNIZED OPENING NO. <input type="checkbox"/> RECOGNIZED VACANCY LISTING ADMINISTRATIVE MESSAGE FACSIMILE NETWORK NO.:	POSITION REQUESTED		
DATE SUBMITTED	TIME SUBMITTED	COMMANDING OFFICER / WATCH COMMANDER'S SIGNATURE	STAR NO.		

**REMARKS SECTION**

PERSONNEL SERVICES



JUN 28 2005



CHICAGO POLICE DEPARTMENT

**SIGNATURES**

SIGNATURE OF MEMBER

RECOMMEND  
APPROVAL  
 DISAPPROVAL

RECOMMEND  
APPROVAL  
 DISAPPROVAL

COMMENTS

RECOMMEND  
APPROVAL  
 DISAPPROVAL

RECOMMEND  
APPROVAL  
 DISAPPROVAL

APPROV  
 DISAPP

20 May 05

I A.D. CLEARANCE  
AS OF:

PERSONNEL DIVISION

STAR  
17998

TO:

KENNETH J. BOADREAU

FROM:

Richard A. Wedgbury, Commander  
Personnel Division

SUBJECT:

MILITARY LEAVE REQUEST FOR OPERATION DESERT SHIELD

Your recent request for Military Leave of Absence from the Chicago Police Department has been received in this Division and is scheduled to become effective as of 26-FEB-1991.

The following information is being provided as a summary of City benefits. According to the Benefits Management Office/Department of Finance, medical insurance coverage will remain in force for you and qualified dependents during the term of military Leave. Dental and vision plan coverage will remain in force for the term of the military Leave for you and your eligible dependents. Basic Life and Accidental Death and Dismemberment Insurance will continue during the term of the military Leave. While on unpaid military Leave you will continue to earn seniority and service time as if actively employed. The City will make required pension contributions.

Within fourteen (14) days of completion of the active military service period, you will be required to report to the Personnel Division for processing to return to active duty with the Police Department. Failure to report within the fourteen day time limit will result in termination of all benefits effective retroactively to the first day following the last day of active military service.

The information provided above is intended as a brief summary of available benefits. If you have further questions regarding medical/hospitalization insurance benefits you should contact the Police Department's insurance unit at 744-5562. Pension questions should be directed to your respective pension office. Questions regarding the Optional Term Life insurance coverage should be directed to Bankers Life at 794-5100. Questions involving the Optional Universal Life coverage can be directed to Metropolitan Life at 1 (800) 331-9975.

Questions involving procedures for return to duty with the Police Department should be directed to the Employment Section at 744-5555. We hope this information summary will be of assistance to you and your dependents.

Richard A. Wedgbury  
Commander  
Personnel Division

Sent by Certified Mail to  
Address of Record:

Address

Date Sent

7-FEB-91

## AFFIDAVIT

TO: Director of Personnel

FROM: Name KENNETH J. BOUDREAU #4796

Title PROBATIONARY POLICE OFFICER

Social Security No. [REDACTED]

SUBJECT: Receipt of First Amendment Judgment

I hereby acknowledge that I have received a copy of General Order 82-10  
regarding the United States District Court First Amendment Judgment.

Signed: [REDACTED]

Date: 14 July 86

RETURN THIS AFFIDAVIT TO THE PERSONNEL DIVISION, ROOM 803, 1121 S. STATE,  
FOR PLACEMENT IN MEMBER'S PERSONNEL FILE.

A

SWORN FIRST AMENDMENT JUDGEMENT AFFIDAVIT  
CHICAGO POLICE DEPARTMENT/PERSONNEL DIVISION

---

TO: COMMANDER OF POLICE PERSONNEL

FROM: NAME: KENNETH J. BOUREAU

TITLE: DETECTIVE

SOCIAL SECURITY NO: [REDACTED]

SUBJECT: RECEIPT OF FIRST AMENDMENT JUDGEMENT

I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY  
OF THE UNITED STATES DISTRICT COURT FIRST AMENDMENT  
JUDGEMENT.

SIGNATURE: [REDACTED]

DATE: 22 JAN 03

STATE OF ILLINOIS  
County Of Cook  
CITY OF CHICAGO

Star No. 852

I, KENNETH J. BOUDREAU  
Name (print)

office of SERGEANT OF POLICE

do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Illinois, and that I will faithfully discharge the duties of the office of such, according to the best of my ability.

[Redacted]  
Signature

[Redacted]  
Address (print)

CHICAGO, IL

Witnessed by:  
[Redacted]

[Redacted]  
Date

01 April 04

Person Making Designation of Beneficiary: KENNETH J. BOUDREAU  
Print name (first, middle, last)

### DESIGNATION OF BENEFICIARY

In accordance with the provisions of the "Law Enforcement Officers, Civil Defense Workers, Civil Air Patrol Members, Paramedics, Firemen, Chaplains, and State Employees Compensation Act," 820 ILCS 315/1 et. seq., I hereby designate the following person or persons as beneficiary or beneficiaries, in the event that compensation benefits are payable if I am killed in the line of duty:

Complete name and address  
of each beneficiary:

Relationship,  
if any:

Percentage Shares:

[Redacted]	[Redacted]	[Redacted]
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Print name (first, middle, last) of person making designation of beneficiary:

KENNETH J. BOUDREAU

Address: [Redacted] CHICAGO, ILLINOIS 60655

Date of Birth: 60 Social Security Number: [Redacted]

Place of Employment under the Act: CHICAGO POLICE DEPARTMENT

Address: 1121 S. STATE STREET, CHICAGO, ILLINOIS 60605

Signature of Witness: [Redacted] Signature of person making designation of beneficiary:

Address of Witness:

5101 S. WOODWARD

Date: 02 Dec 98

\*Effective January 1, 1996, the beneficiary compensation amount is \$100,000.00

## **DESIGNATION OF BENEFICIARY**

IN ACCORDANCE WITH THE PROVISIONS OF THE "LAW ENFORCEMENT OFFICERS,  
CIVIL DEFENSE WORKERS, CIVIL AIR PATROL MEMBERS, PARAMEDICS AND  
FIREMEN COMPENSATION ACT." I HEREBY DESIGNATE THE FOLLOWING AS  
BENEFICIARY, OR BENEFICIARIES, IN THE EVENT THAT THE \$50,000  
BENEFITS ARE PAYABLE BY REASON OF MY DEATH IN THE LINE OF DUTY.

**COMPLETE NAME AND ADDRESS  
OF EACH BENEFICIARY**

**RELATIONSHIP,  
IF ANY**

**CASH AMOUNT  
OR PERCENTAGE**

PRINT NAME (FIRST, MIDDLE, LAST): KENNETH J. BOUDREAU

HOME ADDRESS , Chgo, Ill. 60638

DATE OF BIRTH 60 SOCIAL SECURITY NO.

PLACE OF EMPLOYMENT UNDER THE ACT CHICAGO POLICE DEPARTMENT

ADDRESS 1121 S. STATE STREET, CHICAGO, ILLINOIS 60605

~~SIGNATURE OF WITNESS~~

**SIGNATURE OF PERSON  
DESIGNATING BENEFITS**

WITNESS ADDRESS

1121 State

DATE: 24 July 89

<b>PERSONAL HISTORY QUESTIONNAIRE</b> <b>CHICAGO POLICE DEPARTMENT</b>		1. POSITION APPLIED FOR / EXAMINATION NO. <u>50003</u> <input type="checkbox"/> OTHER - SPECIFY	2. DATE <u>27-FEB-86</u>
3. NAME (LAST — FIRST — M.I.) <b>BOUDREAU, Kenneth Jospeh</b>	(PRINT)	4. MAIDEN NAME (if appl.)	5. HOME PHONE
7. HOME ADDRESS (STREET NO. & NAME) [REDACTED]		(APT. NO.) (COUNTY)	(CITY & STATE, ZIP CODE) <u>Chicago, IL 60652</u> <u>CHAGO, IL 60638</u>
		8. SOCIAL SECURITY NO. [REDACTED]	

#### INSTRUCTIONS

IT IS IMPORTANT TO READ THESE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS QUESTIONNAIRE.

You must be complete and truthful in all your answers. All answers that you give in this application are subject to verification. Any failure to report completely or any untruthful answers may subject you to rejection as a candidate. All information will be considered strictly confidential and will not be disclosed to any unauthorized person.

In this questionnaire, a number of items ask for simple "yes" and "no" answers and do not require any explanation. However, if you wish to explain your answers, use the continuation section. Before each explanation write the reference number of the item. Use this section in the same manner, if your answers need more space than provided.

Do not leave any question blank. If a question does not apply to you, write "NA" (abbreviation for "Not Applicable"). Your answers must be legible.

#### RIGHT TO APPEAL

If the Chicago Police Department finds you to be "not qualified," this finding will be forwarded to the Department of Personnel.

After the Department of Personnel receives the finding that you are to be found "not qualified," the Department will send to you by mail a form that asks whether you desire a hearing. If you wish a hearing, check the appropriate box and mail the form back to the Chicago Department of Personnel. If you do not mail the form to the Department within ten days, no hearing will be held and the Chicago Police Department recommendation that you are "not qualified" will be accepted by the Department of Personnel.

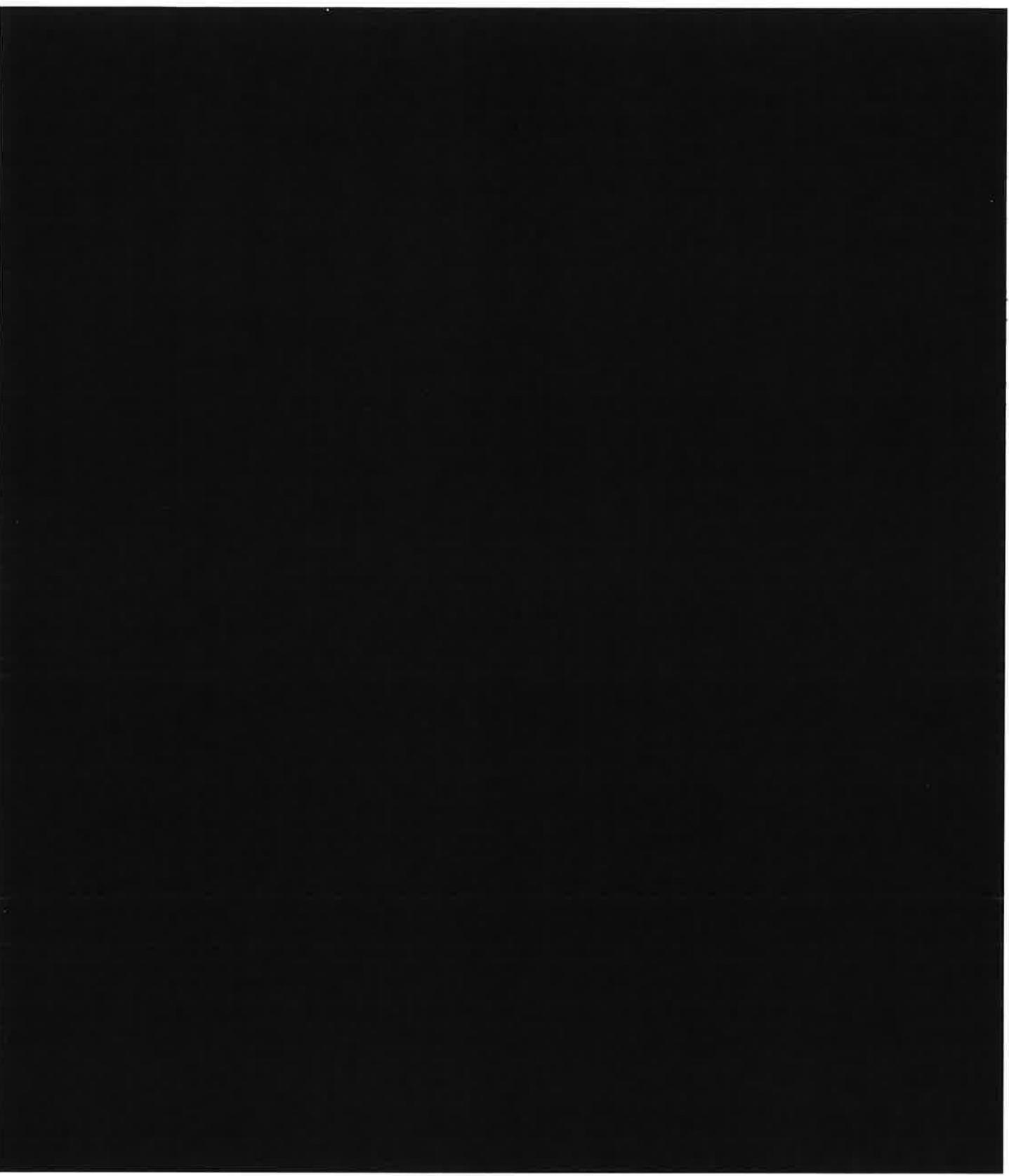
If you desire a hearing, you may be represented by counsel at such hearing. Any hearing before the Department will be conducted in accordance with the Rules of the Department of Personnel.

I understand that all of the appeal procedures are available to all candidates and that additional opportunities will be made available to provide clarification of the items on the questionnaire.

I have read and I understand all of the above instructions applying to this (police officer) preinterview questionnaire.

9. SIGN  
[REDACTED]

DATE  
27 FEB 86



CPD-62.152

CONFIDENTIAL

E US

ICEN

26



CPD-62.152

**CONTINUATION SECTION**

Indicate in the left hand column the number of the question you are answering, then complete your answer in the space provided.

SIGNATURE

DATE

CHICAGO POLICE DEPARTMENT

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, KENNETH J. BOUDREAU, do hereby authorize a review of and full disclosure of all records concerning myself to the Chicago Police Department, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions; financial or credit institutions including records of loans, the records of commercial or retail credit agencies (including credit reports, and/or ratings); and other financial statements and records whether filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records, including background reports, and efficiency ratings.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the City of Chicago. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I have read and fully understand the contents of this "Authorization for Release of Personal Information".

SIGNATURE (include maiden name) [REDACTED]  
ADDRESS: [REDACTED] CORRECTION: [REDACTED]  
[REDACTED] CHICAGO, ILLINOIS 60658 [REDACTED] CHICAGO, ILLINOIS 60638.  
PHONE: [REDACTED]  
DATE OF BIRTH: 1960  
SOCIAL SECURITY NO. [REDACTED]  
WITNESS [REDACTED] DATE 27 FEB 86

BOUDREAU: KENNETH

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EMD

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CSD 14-111-1986

CSD 14-JuJ-1986

2014 P BFD

SELL BACK

CARRY OVER

RES 016

EMP [REDACTED]

# 00852

UNIT 393

SIN 01-APR-2004

CSD 14-Jul-1986

9171

1 OCT 2014

1 OCT 2014

1 OCT 2014

1 OCT 2014

10 cont.

10-B

10-B

10-B

ACTUAL OVERT

COMP TIME

COMP TIME

PAY HOURS

PAY HOURS

PAY HOURS

CYCLE 11

CYCLE 11

CYCLE 11

ACTUAL OVERT

COMP TIME

COMP TIME

BOUDREAU, KENNETH J

2011 SWORN SUPERVISOR

# 00852  
RES 022 EMP

BOUDREAU, KENNETH J

# (0852)

RES 022 UNI 393  
CSD 14-Jul-86 SEN 1-Apr-04

PAYS GRANTED										# DAYS CARRYOVER		TOTAL		BFD GRANTED		BFD CARRYOVER		TOTAL		ACCREDITS PURCHASED VACATION TIME	
CYCLE	ACTUAL OVERT.	COMP. TIME	PAY HOURS	ID		V	SU DA	FMLA AN ML	P BFD	OUT OF GRADE		ACTUAL TIME		PAID OVERTIME		COMP TIME HOURS					
				SP	SP					D2	D3	4	5	6	7	8	9				
4 cont.				20 MAR	21	22	23	24	25	26	27	28	29	30	31	44	1 APR				
ACTUAL OVERT.																					
COMP. TIME	.14	.75	.75																		
PAY HOURS																					
CYCLE	5	3 APR	4	5	6	7	8	9	10	11	12	13	14	15	16	17	1 APR				
ACTUAL OVERT.																					
COMP. TIME	.75	-1	.75																		
PAY HOURS																					
CYCLE	6	1 MAY	2	3	4	5	6	7	8	9	10	11	12	13	14	15	1 MAY				
ACTUAL OVERT.																					
COMP. TIME	.75	.75	.75																		
PAY HOURS																					
CYCLE	7	15 MAY	16	17	18	19	20	21	22	23	24	25	26	27	28	29	1 JUN				
ACTUAL OVERT.																					
COMP. TIME	.75	.75	.75																		
PAY HOURS																					
CYCLE	8	29 MAY	30	31	1 JUN	2	3	4	5	6	7	8	9	10	11	12	1 JUN				
ACTUAL OVERT.																					
COMP. TIME																					
PAY HOURS																					
CYCLE	9	12 JUN	13	14	15	16	17	18	19	20	21	22	23	24	25	26	1 JUN				
ACTUAL OVERT.																					
COMP. TIME																					
PAY HOURS																					

BOUDREAU, KENNETH J.

并 00852

RES 022 EMI

9171 UNI 393  
CSD 14-Jul-86 SEN 1-Apr-04

## **2011 SWORN SUPERVISOR TIME & ATTENDANCE RE**

2011 SWORN SUPERVISOR TIME & ATTENDANCE RE												ACCUMULATED FURLOUGH/VACATION TIME																	
RES 022 EMP#			UNI 393			CSD 14-Jul-86 SEN 1-Apr-04			P DAYS GRANTED			P DAYS CARRYOVER			TOTAL			EFD GRANTED			BFD CARRYOVER			TOTAL					
IDC		ICD		V		SP		SU DA		FMLA AN ML		P		OUT OF GRADE		BALANCE FORWARD		F.L.S.A.		ACTUAL TIME		PAID OVERTIME		COMP TIME HOURS					
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COMP TIME																													
PAY HOURS																													
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12	ACTUAL OVERT.																												
COMP. TIME																													
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CYCLE	30 OCT 31	1 NOV 2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	
ACTUAL OVERT.																													
COMP. TIME																													
PAY HOURS																													
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COMP. TIME																													
PAY HOURS																													
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BOUDREAU, KENNETH J

# 00852

RES 022 EMP [REDACTED]

9171 UNI 393

CSD 14-Jul-86 SEN 1-Apr-04

All Holidays Mgmt										Accrued Furlough/Vacation Time									
CYCLE		P DAYS GRANTED			P DAYS CARRIED OVER			TOTAL		BED GRANTED		BED CARRIED OVER			PAID OVERTIME		COMP TIME HOURS		
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BOUDREAU, KENNETH J

# 00852

RES 022 EMP [REDACTED]  
9171 UNIT 393 SEN 1-Apr-04  
CSD 14-Jul-86

CYCLE	P-DAYS GRANTED				P-DAYS CARRIED OVER				TOTAL				BFD GRANTED				BFD CARRIED OVER				TOTAL				ACCUMULATED P-FALLOUGH/VACATION TIME				
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ACTUAL OVERT																													





BOUDREAU, KENNETH J.

**2012 SWORN SUPERVISOR  
TIME & ATTENDANCE RECORD**

RES (22) UNIT 393  
CSD 14-Jul 86 SEN 1-APR 04

FUR. SEG. 1	FUR. SEG. 2	8A	DAYS GRANTED			DAYS CARRIEDOVER			TOTAL	BFD GRANTED	BFD CARRIEDOVER	PAID OVERTIME	OVERTIME	BAL FOWARD	BAL FORWARD	OTHER	ACCURED BUT NOT HONORIFICATION TIME			
			10D			V				OUT OF GRADE			FLS.A. ACTUAL TIME							
			BFD	D1	D2	BFD	D1	D2		BFD	D1	D2	BFD	D1	D2					
CYCLE 1	11 DEC 12	13	14	15	16	17	18	19	20	21	22	23	24	13			120.04			
ACTUAL OVERTIME																				
COMP. TIME																				
PAY HOURS	25 DEC 26	28	29	30	31	1 JAN 2013	2	3	4	5	6	7	DO	4	10	16	20.79			
ACTUAL OVERTIME	RD																			
COMP. TIME																				
PAY HOURS																				
CYCLE 2	6 JAN 9	10	11	12	13	14	15	16	17	18	19	20	21	DO	6	12	18.5			
ACTUAL OVERTIME																				
COMP. TIME																				
PAY HOURS																				
CYCLE 3	12 JAN 23	24	25	26	27	28	29	30	31	1 FEB 1	2	3	4	4	10	16	18.0			
ACTUAL OVERTIME	RD																			
COMP. TIME																				
PAY HOURS																				
CYCLE 4	15 FEB 6	7	8	9	10	11	12	13	14	15	16	17	18	DO	6	12	18.0			
ACTUAL OVERTIME																				
COMP. TIME																				
PAY HOURS																				
RES (22)	11 DEC 12	13	14	15	16	17	18	19	20	21	22	23	24	DO	6	12	18.0			
UNIT 393																				
CSD	14-Jul 86	SEN 1-APR 04																		

BOUDREAU, KENNETH J

**2012 SWORD SUPERVISOR  
TIME & ATTENDANCE RECORD**

# 000852

CPD-11.602-S (2012) SWORN SUPERVISOR

103-DB

52

3 - Doh  
1 - P  
1 - Code H-1  
3 - BFD  
Code 40 - 4  
3 - From Vac Box;  
Destination Jan VAC  
Address 11500



# 00852

CYCLE	RES 016 EMP [REDACTED]		UNIT 393		CSD 14-Jul-86 SEN 1-Apr-04		P DAYS GRANTED		P DAYS CARRYOVER		TOTAL		BFD GRANTED		BFD CARRYOVER		TOTAL		ACCUMULATED FURLough/VACATION TIME							
							IOD		V		SU DA		FMLA AN ML		BFD		OUT OF GRADE		F.L.S.A.		ACTUAL TIME		PAD OVERTIME		COMP TIME HOURS	
		SP						D2	D3												F.L.S.A.	OTHER				
4 cont.	17 MAR 18 3B/22	19	20	21	22	23	24	25	/	26	/	27	28	29	30	BALANCE FORWARD										
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 5	31 MAR 1 APR 2 15 13	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	80	5	120	11.5	x 1.5	12.75	1.5	195.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 6	1 APR 1 MAY 2 16 14	17	18	19	20	21	22	23	24	25	26	27	28	29	30	12.75	9	135	8.0	x 1.5	11.25	1.5	196.5			
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 7	2 MAY 1 JUN 2 17 15	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5			
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 8	25 MAY 27 MAY 28 18 16	19	20	21	22	23	24	25	26	27	28	29	30	31	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5			
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 9	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 10	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 11	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 12	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 13	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 14	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 15	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 16	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										
CYCLE 17	1 JUN 2 16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1 JUN 2 17	12.75	15	17.5	x 1.5	14.5	1.5	209.5	161.5		
ACTUAL OVERT.																										
COMP TIME																										
PAY HOURS																										

BOUDREAU, KENNETH J.

2013 SWORN SUPERVISOR  
TIME & ATTENDANCE RECO

# 00852  
RES 016 EMH

BOUDREAU, KENNETH J

# 00852

RES 016 EMP [REDACTED]

UNIT 393

9171 CSD 14-Jul-86

SEN 1-Apr-04

		P DAYS GRANTED		P DAYS CARRYOVER		TOTAL		BFD GRANTED		BFD CARRYOVER		TOTAL		ACCUSED FURLOUGH/VACATION TIME	
CYCLE	HOURS	IOD	V	SU	DA	FMLA	P	OUT OF GRADE	F.L.S.A.	ACTUAL TIME	PAYOUT	OVERTIME	F.L.S.A.	COMP TIME HOURS	
		SP	SP	BFD	D2	BFD	D2	D3							
11 com.	29-SEP-30 10-8-1														
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	13 OCT 14 OCT 15 12	16	17	18	19	20	21	22	23	24	25	26			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	27-OCT-28 11-8-1	30	31	1 NOV	2 NOV	3 NOV	4 NOV	5 NOV	6 NOV	7 NOV	8 NOV	9 NOV			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	10 NOV 11 NOV 12 12-8-1	13	14	15	16	17	18	19	20	21	22	23			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	24 NOV 25 12-8-1	26	27	28	29	30	1 DEC	2	3	4	5	6			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	1 NOV 2 NOV 3 NOV 13-8-1	4	5	6	7	8	9	10	11	12	13	14			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	2 NOV 3 NOV 4 NOV 14-8-1	5	6	7	8	9	10	11	12	13	14	15			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	5 NOV 6 NOV 7 NOV 15-8-1	6	7	8	9	10	11	12	13	14	15	16			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	8 NOV 9 NOV 10 NOV 16-8-1	7	8	9	10	11	12	13	14	15	16	17			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	9 NOV 10 NOV 11 NOV 17-8-1	8	9	10	11	12	13	14	15	16	17	18			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	10 NOV 11 NOV 12 NOV 18-8-1	9	10	11	12	13	14	15	16	17	18	19			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	11 NOV 12 NOV 13 NOV 19-8-1	10	11	12	13	14	15	16	17	18	19	20			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	12 NOV 13 NOV 14 NOV 20-8-1	11	12	13	14	15	16	17	18	19	20	21			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	13 NOV 14 NOV 15 NOV 21-8-1	12	13	14	15	16	17	18	19	20	21	22			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	14 NOV 15 NOV 16 NOV 22-8-1	13	14	15	16	17	18	19	20	21	22	23			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	15 NOV 16 NOV 17 NOV 23-8-1	14	15	16	17	18	19	20	21	22	23	24			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	16 NOV 17 NOV 18 NOV 24-8-1	15	16	17	18	19	20	21	22	23	24	25			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	17 NOV 18 NOV 19 NOV 25-8-1	16	17	18	19	20	21	22	23	24	25	26			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	18 NOV 19 NOV 20 NOV 26-8-1	17	18	19	20	21	22	23	24	25	26	27			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	19 NOV 20 NOV 21 NOV 27-8-1	18	19	20	21	22	23	24	25	26	27	28			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	20 NOV 21 NOV 22 NOV 28-8-1	19	20	21	22	23	24	25	26	27	28	29			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	21 NOV 22 NOV 23 NOV 29-8-1	20	21	22	23	24	25	26	27	28	29	30			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	22 NOV 23 NOV 24 NOV 30-8-1	21	22	23	24	25	26	27	28	29	30	31			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	23 NOV 24 NOV 25 NOV 31-8-1	22	23	24	25	26	27	28	29	30	31	1			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	24 NOV 25 NOV 26 NOV 1-9-1	23	24	25	26	27	28	29	30	31	1	2			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	25 NOV 26 NOV 27 NOV 2-9-1	24	25	26	27	28	29	30	31	1	2	3			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	26 NOV 27 NOV 28 NOV 3-9-1	25	26	27	28	29	30	31	1	2	3	4			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	27 NOV 28 NOV 29 NOV 4-9-1	26	27	28	29	30	31	1	2	3	4	5			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	28 NOV 29 NOV 30 NOV 5-9-1	27	28	29	30	31	1	2	3	4	5	6			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	29 NOV 30 NOV 31 NOV 6-9-1	28	29	30	31	1	2	3	4	5	6	7			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	30 NOV 31 NOV 1 DECEMBER 7-9-1	29	30	31	1	2	3	4	5	6	7	8			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	31 NOV 1 DECEMBER 2 DECEMBER 8-9-1	30	31	1	2	3	4	5	6	7	8	9			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	1 DECEMBER 2 DECEMBER 3 DECEMBER 9-9-1	31	1	2	3	4	5	6	7	8	9	10			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	2 DECEMBER 3 DECEMBER 4 DECEMBER 10-9-1	1	2	3	4	5	6	7	8	9	10	11			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	3 DECEMBER 4 DECEMBER 5 DECEMBER 11-9-1	2	3	4	5	6	7	8	9	10	11	12			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	4 DECEMBER 5 DECEMBER 6 DECEMBER 12-9-1	3	4	5	6	7	8	9	10	11	12	13			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	5 DECEMBER 6 DECEMBER 7 DECEMBER 13-9-1	4	5	6	7	8	9	10	11	12	13	14			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	6 DECEMBER 7 DECEMBER 8 DECEMBER 14-9-1	5	6	7	8	9	10	11	12	13	14	15			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	7 DECEMBER 8 DECEMBER 9 DECEMBER 15-9-1	6	7	8	9	10	11	12	13	14	15	16			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	8 DECEMBER 9 DECEMBER 10 DECEMBER 16-9-1	7	8	9	10	11	12	13	14	15	16	17			
ACTUAL OVERT.															
COMP TIME															
PAY HOURS	9 DECEMBER 10 DECEMBER 11 DECEMBER 17-9-1	8	9												



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PAGES 016

ACCREDITS FULGURANT VACATION TIME																	
EMP #		UNIT		SEN 01-Apr-2004		P/DAYS CARRIED OVER TOTAL		BFD GRANTED		BFD CARRYOVER TOTAL		4		COMP, TIME HOURS		PAID TIME	
CYCLE 3 cont.	ACTUAL OVERT COMP. TIME PAY HOURS	V	SP	FDC	P OUT OF GRADE	FMIA AN ML	BALANCE FORWARD	D4	DS	FLSA ACTUAL TIME	80	10.	16.	BAL FORWARD		FLSA	
														3 USED		6 USED	
CYCLE 4	ACTUAL OVERT COMP. TIME PAY HOURS	V	SP	FDC	P OUT OF GRADE	FMIA AN ML	BALANCE FORWARD	D4	DS	FLSA ACTUAL TIME	80	10.	16.	BAL FORWARD		FLSA	
														3 USED		6 USED	
CYCLE 5	ACTUAL OVERT COMP. TIME PAY HOURS	V	SP	FDC	P OUT OF GRADE	FMIA AN ML	BALANCE FORWARD	D4	DS	FLSA ACTUAL TIME	80	10.	16.	BAL FORWARD		FLSA	
														3 USED		6 USED	
CYCLE 6	ACTUAL OVERT COMP. TIME PAY HOURS	V	SP	FDC	P OUT OF GRADE	FMIA AN ML	BALANCE FORWARD	D4	DS	FLSA ACTUAL TIME	80	10.	16.	BAL FORWARD		FLSA	
														3 USED		6 USED	

